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COVER LETTER

10:	Registration Section Division of Corporations		
SUBJ	ECT: AM GROUP 2000 CORP.		
	Name of corporation	- must include suffix	
Dear S	Sir or Madam:		
-Certi	nclosed "Application by Foreign Corporation for ficate of Existence," or "Certificate of Good Stan referenced foreign corporation to transact busine	ding" and check are submitt	
Please	return all correspondence concerning this matter	to the following:	
Alexan	der Hromov		
	Name of	Person	
AM GI	ROUP 2000 CORP.		
	Firm/Con	npany	
6120 G	Grand Central Parkway, Apt. B702		
	Addr	ess	
Forest	Hills, NY, 11375		
	City/State a	nd Zip code	
hromo	valex@gmail.com		.
	E-mail address: (to be used	for future annual report notif	ication)
For fu	rther information concerning this matter, please of	all:	
Alexan	ider Hromov at (718) 679-8170	NI I
	Name of Person Area Cod	e Daytime Telephon	e Number
	STREET/COURIER ADDRESS: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	MAILING ADD Registration Section Division of Corpo P.O. Box 6327 Tallahassee, FL 1	on orations
Please	sed is a check for the following amount: make check payable to: FLORIDA DEPARTMENT 0.00 Filing Fee		■ \$87.50 Filing Fee. Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES. THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

	•	adopted for the purpose of transacting bu	siness in Florida)
New York State	3.	20-8926334	-
(State or count	y under the law of which it is incorporated)	(FEI number. if applica	
04/24/2007			
(Date	of incorporation)	(Date of duration, if other than	perpetual)
·			
		n Florida, if prior to registration) 502, F.S., to determine penalty liability)	
.7901 4th St Nortl	, Ste 300, St. Petersburg, FL, 33702		**
	(Principal off	ce <u>street</u> address)	
6120 Grand Cen	ral Parkway, Apt. B702, Forest Hills, NY, 113	75	
	(Current mailir	g address, if different)	
. Name and <u>stre</u>	et address of Florida registered agent: (P.C	D. Box <u>NOT</u> acceptable)	2621
Name:	Registered Agents Inc		<u> </u>
Office Address:	7901 4th St North. Ste 300		2024 MAR 14
			
	St. Petersburg (City)	, Florida <u>33702</u> (Zip code)	43 l9:
	(City)	(zip code)	ب ج
			O ,

10. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

11. For initial indexing purposes, list names, titles and addresses of the primary officers and/or directors [up to six (6) total]:

A: DIRECTORS				
□Chairman	Name: Alexander Haomov	□Chairman	Name:	
□Vice Chairman	Address: 4120 GRAND CONTROL PKWY	□Vice Chairman	Address:	
□Director	Apt. 6702	□Director		
■ President	Forest Hills Ny 11376	□President		
□Vice President		□Vice President		
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		Other
□Chairman	Name:	□Chairman	Name:	
□Vice Chairman	Address:	□Vice Chairman	Address:	
□Director		□Director		
□President		□President		
□Vice President		□Vice President	,	
□Secretary	□Treasurer	☐ Secretary		□Treasurer
□Other	Other	□Other		□Other
_				
□Chairman	Name:	□Chairman		
□ Vice Chairman	Address:	□Vice Chairman	Address:	<u> </u>
□Director		□Director		
□President		□President		
□Vice President		□Vice President		
☐ Secretary	□Treasurer	☐ Secretary		□Treasurer
□6.1		□Other		□Other
□Other				
Important Notice:	Use an attachment to report prore than six (6). The att	achment will be image nent of State Annual R	ed for reporting eport form.	purposes only. Non-indexed
Important Notice:	e added to the index when filing your Florida Departm	nent of State Annual R	eport form.	purposes only. Non-indexed

The officer or director signing this document (and who is listed in number 11 above) affirms that the facts stated herein are true and that he of she is aware that false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

13. Alexander Hromov

STATE OF NEW YORK

DEPARTMENT OF STATE

Certificate of Status

I, ROBERT J. RODRIGUEZ, Secretary of State of the State of New York and custodian of the records required by law to be filed in my office, do hereby certify that upon a diligent examination of the records of the Department of State, as of the date and time of this certificate, the following entity information is reflected:

Entity Name: AM GROUP 2000 CORP.

DOS 1D Number: 3507770

Entity Type: DOMESTIC BUSINESS CORPORATION

Entity Status: EXISTING

Date of Initial Filing with DOS: 04/24/2007

Statement Status: PAST DUE DATE

Statement Due Date: 04/30/2011

No information is available from this office regarding the financial condition, business activity or practices of this entity.



WITNESS my hand and official seal of the Department of State, at the City of Albany, on February 29, 2024 at 11:22 A.M.

ROBERT J. RODRIGUEZ, Secretary of State

Brandon C Hughan

By Brendan C. Hughes
Executive Deputy Secretary of State

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