

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 28, 2005 8:00 am
Secretary of State

04-28-2005 90181 024 ***150.00

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1. Entity Name
AGG HOLDING CORP.



Principal Place of Business
**645 PARK OF COMMERCE WAY
BOCA RATON, FL 33487**

Mailing Address
**645 PARK OF COMMERCE WAY
BOCA RATON, FL 33487**

14004127



03312005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
65-0828139

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**HARTNEY, KEVIN P
645 PARK OF COMMERCE WAY
BOCA RATON, FL 33487**

**DO NOT WRITE
IN THIS SPACE**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE D
NAME BLANDING, LARS
STREET ADDRESS 645 PARK OF COMMERCE WAY
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE D
NAME DAVIS, JAMES B
STREET ADDRESS 645 PARK OF COMMERCE WAY
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE S
NAME HARTNEY, KEVIN P
STREET ADDRESS 645 PARK OF COMMERCE WAY
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE D
NAME BRAILSFORD, MARVIN B
STREET ADDRESS 645 PARK OF COMMERCE WAY
CITY-ST-ZIP BOCA RATON, FL 33487

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

KEVIN P. HARTNEY

4/1/05

561-989-3823

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #