

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# L48828

FILED  
Apr 02, 2012  
Secretary of State

**Entity Name:** ANOTHER GENERATION HOLDINGS, INC.

**Current Principal Place of Business:**

3500 GATEWAY DRIVE  
SUITE # 201  
POMPANO BEACH, FL 33069 US

**New Principal Place of Business:**

**Current Mailing Address:**

3500 GATEWAY DRIVE  
SUITE # 201  
POMPANO BEACH, FL 33069 US

**New Mailing Address:**

**FEI Number:** 65-0176353      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired (X)**

**Name and Address of Current Registered Agent:**

FINEBERG, LIBO S  
3500 GATEWAY DRIVE  
SUITE # 201  
POMPANO BEACH, FL 33069 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

**Title:** DVT  
**Name:** GOLDMAN, RICHARD M  
**Address:** 2585 GLADES CIRCLE  
**City-St-Zip:** WESTON, FL 33327 US

**Title:** DVS  
**Name:** FINEBERG, LIBO B  
**Address:** 3500 GATEWAY DRIVE, SUITE 201  
**City-St-Zip:** POMPANO BEACH, FL 33069 US

**Title:** DPS  
**Name:** GOLDMAN, RENEE K  
**Address:** 2585 GLADES CIRCLE  
**City-St-Zip:** WESTON, FL 33327 US

**Title:** AVP  
**Name:** FORTICH-LUTZ, MERCEDES E  
**Address:** 2585 GLADES CIRCLE  
**City-St-Zip:** WESTON, FL 33327 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MERCEDES E. FORTICH-LUTZ

AVP

04/02/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date