FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION SES ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Secretary of State **DIVISION OF CORPORATIONS**

FILED Mar 22, 1999 8:00 am Secretary of State Katherine Harris

03-22-1999 90008 009 ***150.00

DOCUMENT # L57421

1. Corporation Name

AGM INVESTMENTS, INC.

Principal Place of Business	Mailing Address))) 818m	<u> </u>		
8051 ULMERTON ROAD LARGO FL 33771 US	8051 ULMERTON ROAD LARGO FL 33771 US	LARGO FL 33771		, DO NOT WRITE IN THIS SPACE				
				03/12/1990				
2. Principal Place of Business	2a. Mailing Address			4. FEI Number 59-2994750		Applied For Not Applicable		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27				5. Certifcate of Status Desired See Required				
City & State City & State				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip Country 25	Zip Co 29 30	—		8. This corporation owes the current year Intangible Personal Property Tax. Yes No				
9. Name and Address of Curren	it Registered Agent		10. Name and Address of New Registered Agent					
MICHAS, ALEX 8051 ULMERTON ROAD LARGO FL 33771			Name					
			Street Address (P.O. Box Number is Not Acceptable)					
			83					
			City	FL	85	Zip Code		
 Pursuant to the provisions of Sections 607 050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obliga 	of Florida. Such change was authorize	d by t	the corporation	ration submits this statement for the purpose of one board of directors. I hereby accept the appoint	tment a	ng its registered as registered		
SIGNATURE								

11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE	. Signature, typed or printed name of registered agent and title if applicable.	/NOTE: De	priotered Agent signature	required when reinstating)		DATE			
12.	OFFICERS AND DIRECTORS	h14.12.110	13.	<u> </u>	S/CHANGES TO OFFIC		RS IN 12		
TITLE		DELETE	1.1 TITLE	1	0.0.0.0.0.0	☐ Change	Addition		
NAME	MICHAS, ALEX		1.2 NAME				_		
STREET ADDRESS	8051 ULMERTON ROAD		1.3 STREET ADDRESS						
CITY-ST-ZIP	LARGO FL 33771		1.4 CITY-ST-ZIP	·					
TITLE	VPD ·	DELETE	2.1 TITLE			☐ Change	☐ Addition		
NAME	CHAPMAN, ROBERT		2.2 NAME						
STREET ADORESS	8051 ULMERTON ROAD	•	2.3 STREET ADDRESS						
CITY-ST-ZIP	LARGO FL 33771		2.4 CITY-ST-ZIP						
TITLE	\$	DELETE	3.1 TITLE			☐ Change	☐ Addition		
NAME	MICHAS, BRENDA		3.2 NAME						
STREET ADDRESS	8051 ULMERTON ROAD		33 STREET ADDRESS						
CITY-ST-ZIP	LARGO FL 33771		34. CITY-ST-ZIP						
TITLE		DELETE	4.1 TITLE			Change	- 🔄 Addition		
NAME -		~~ ~~	4. 2 NAME						
STREET ADDRESS	· ·		4.3 STREET ADDRESS						
CITY-ST-ZIP			4.4 CITY-ST-ZIP						
TITLE		DELETE	5.1 TMLE			☐ Change	☐ Addition		
NAME			5.2 NAME		-				
STREET ADDRESS			5.3 STREET ADDRESS						
CITY-ST-ZIP			5.4 CITY-ST-ZIP						
TITLE		DELETE	6.1 TITLE			☐ Change	Addition		
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREET ADDRESS						
CITY-ST-ZIP			6.4 CITY-ST-ZIP						

14. 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 annual report or supplemental annual 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 prort as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with applicates, with all other literature.