2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 27, 2009
Secretary of State

DOCUMENT# N08000008624

Entity Name: A&G MINISTRIES, INC

Current Principal Place of Business:

8900 NW 107 COURT
203
DORAL, FL 33178

New Principal Place of Business:

4820 NW 99 COURT
DORAL, FL 33178

Current Mailing Address:

8900 NW 107 COURT
203
DORAL, FL 33178

New Mailing Address:

4820 NW 99 COURT
DORAL, FL 33178

FEI Number: **FEI Number Applied For (X)** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

GIL, GABRIEL
8900 NW 107 COURT
203
DORAL, FL 33178 US

Name and Address of New Registered Agent:

IGOR, ALONSO
4820 NW 99 COURT
DORAL, FL 33178 US

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: IGOR R. ALONSO 08/27/2009
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: ALONSO, IGOR
Address: 8900 NW 107 COURT # 203
City-St-Zip: DORAL, FL 33178

Title: VP ( ) Delete
Name: GIL, GABRIEL
Address: 8900 NW 107 COURT # 203
City-St-Zip: DORAL, FL 33178

Title: M (X) Delete
Name: ALONSO, GRACY
Address: 8900 NW 107 COURT # 203
City-St-Zip: DORAL, FL 33178

Title: M (X) Delete
Name: GIL, KARINA
Address: 8900 NW 107 COURT # 203
City-St-Zip: DORAL, FL 33178

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition
Name: ALONSO, IGOR
Address: 4820 NW 99 COURT
City-St-Zip: DORAL, FL 33178

Title: M (X) Change ( ) Addition
Name: ALONSO, GRECY
Address: 4820 NW 99 COURT
City-St-Zip: DORAL, FL 33178

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: IGOR R. ALONSO P 08/27/2009
Electronic Signature of Signing Officer or Director — Date