

FOR PROFIT CORPORATION - 2001
UNIFORM BUSINESS REPORT (UBR)

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DOCUMENT # P0000085137

1. Entity Name

AGM Machinery Inc.

FILED

02 AUG 22 AM 10:16

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

20283 S.R. 7

3. Mailing Address

20283 S.R. 7

Suite, Apt. #, etc.

Suite 400

Suite, Apt. #, etc.

Suite 400

City & State

Boca Raton, FL

City & State

Boca Raton, FL

Zip

33498

Country

Zip

33498

Country

4. FEI Number

65-1115412

Applied For

Not Applied For

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

7. Name and Address of Current Registered Agent

Name

Alfred Gray

Street Address (P.O. Box Numbers Not Acceptable)

20283 S.R. 7 Suite 400

City

Boca Raton

FL

Zip Code

33498

**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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

7/1/02

9. This corporation is eligible to satisfy its intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST Gray, Alfred 20283 S.R. 7 Suite 400 Boca Raton, FL 33498
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300007428189--1
 -08/29/02--01050--024
 *****200.00 *****300.00

**DO NOT WRITE
 IN THIS SPACE**

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13. 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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7/1/02

Date

Daytime Phone #

Attachment

page 2 of 2

AGM Machinery, Inc.
20283 S.R.7
Suite 400
Boca Raton
Florida
33498

August 14th, 2002

The Department of State
Division of Corporations
Tallahassee
Florida

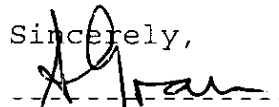
Dear Sirs:

RE: AGM MACHINERY, INC. P00001185137

The registered agent for the above corporation changed his address in January 2001. He advised the post office of the change. However, he never received the first or the second reminder to file the annual report for the corporation. As a result we never filed this report until our new accountant asked us if the fee had been paid. We would appreciate it if you would accept the check for \$ 300.00 for 2001 and 2002 and abate the penalty.

We apologize for any inconvenience caused.

Sincerely,


A. Grau. (Pres)