## **2004 FOR PROFIT CORPORATION**

## Apr 15, 2004 08:00 AM Secretary of State ANNUAL REPORT. **DOCUMENT # P00000112856** 1. Entity Name AGC INDUSTRIES, INC. Principal Place of Business Mailing Address 5222 16TH ST 5222 16TH ST ZEPHYRHILLS, FL 33542 ZEPHYRHILLS, FL 33542 04052004 No Cha-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-1063800 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 8. Name and Address of Current Registered Agent DO NOT WRITE JONES, MARK E 5222 16TH ST ZEPHYRHILLS, FL 33542 IN THIS SPACE 5. 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 little if applicable. (NOTE, Registered Agent signature required when reinstaling) U00000113477 04/15/04-80012-001 150.00 9. Election Campaign Financing \$5.00 May 8e FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. TITLE JONES, MARK NAME STREET ADDRESS 5222 16TH ST CITY-ST-ZIP ZEPHYRHILLS, FL 33542 TITLE JONES, JOYCE NAME STREET ADDRESS 5222 16TH ST CITY-ST-ZIP ZEPHYRHILLS, FL 33542 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE MANE STREET ADDRESS CRTY-ST-ZIP SMAKE STREET ADDRESS CITY-ST-ZIP

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 acquirate 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 truebee impowered 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: \_

NAME STREET ADDRESS

> one ME OF SIGNING OFFICER OR DIRECTOR

**FILED**