

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000062055

FILED
Feb 01, 2006
Secretary of State

Entity Name: AGS U.S., INC.

Current Principal Place of Business:

3951 SW 47 AVENUE
SUITE 106
DAVIE, FL 33314 US

New Principal Place of Business:

Current Mailing Address:

3951 SW 47 AVENUE
SUITE 106
DAVIE, FL 33314 US

New Mailing Address:

FEI Number: 65-1121543 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BERGER, DAVID S
100 NORTH BISCAYNE BOULEVARD
SUITE 2608
MIAMI, FL 33132 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PS () Delete
Name: GONCALVES DA SILVA, ARMINDO
Address: RUA NAGIBE COSSERMELLI 40 VILA RICA
City-St-Zip: CRUZEIRO, SP 12712 BR

Title: VP () Delete
Name: WARD, THOMAS
Address: 17831 NW 14 STREET
City-St-Zip: PEMBROKE PINES, FL 33029

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VP (X) Change () Addition
Name: WARD, THOMAS
Address: 4116 SAPPHIRE STREET
City-St-Zip: WESTON, FL 33331

I hereby certify that the information supplied with this filing does not qualify for the 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: THOMAS WARD

VP

02/01/2006

Electronic Signature of Signing Officer or Director

_____ Date