Amended 2010

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P01000075649

FILED
10 SEP -2 PM 2:25
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Entity Name
AM GROUP HOLDING, INC

[redacted]

Principal Place of Business	Mailing Address
4601 NW 199 St Miami, Fl 33055	

☐ CHECK HERE IF MAKING CHANGES

2. Principal Place of Business	3. Mailing Address
Same as above	3130 SW 109 Ct
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State: Miami, Fl
Zip / Country	Zip: 33165 / Country: USA

4. FEI Number: 65-1129292 — Applied For ☐ / Not Applic. ☐

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
AG CORPORATE SERVICES, LLC 5805 Blue Laggon Dr # 200 Miami, Fl 33126	Name: Anselmo M Mendive Street Address (P.O. Box Number is Not Acceptable): 4601 NW 199 St Mismi, Fl 33055 City: FL — Zip Code

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. I am familiar with, and acc the obligations of registered agent.

SIGNATURE: Anselmo M Mendive — Sept 1. 2010
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent's signature required where indicated) DATE

[redacted]

9. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May B Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS (if 11
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PC Anselmo M Mendive 3130 SW 109 Ct Miami, Fl 33165 ☐ Delete	☐ Change ☐ Add DOCUMENT NUMBER 03/02/10--01033--001 **461.25
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VSC Yin Mendive Garcia 6555 NW 36 St, # 114 Virginia Gardens, FL 33166 XXX ☐ Delete	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD Julio E Garcia 6555 NW 36 St., No. 114 Virginia Gardens, Fl 33166 XXX ☐ Delete	☐ Change ☐ Add
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	VP XXX ☐ Change ☐ Add AMPARO MENDIVE 3130 SW 109 Ct Miami, Fl 33165
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Delete	☐ Change ☐ Add

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 informatio 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 directo 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 10 or Block 11 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED Anselmo M Mendive — Sept 1, 2010