

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000078140

Entity Name: AGA BROKERS CORP.

FILED
Jul 17, 2007
Secretary of State

Current Principal Place of Business:

560 RIDGEWOOD ROAD
KEY BISCAYNE, FL 33149

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 490252
KEY BISCAYNE, FL 33149

New Mailing Address:

560 RIDGEWOOD ROAD
KEY BISCAYNE, FL 33149

FEI Number: 20-0091579

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AGUIRRE, ANTONIO G
560 RIDGEWOOD RD.
KEY BISCAYNE, FL 33149 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PSTD () Delete
Name: AGUIRRE, ANTONIO G
Address: 560 RIDGEWOOD ROAD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PSTD () Delete
Name: WOLMAN, VERONICA C
Address: 560 RIDGEWOOD ROAD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PSTD () Delete
Name: AGUIRRE, ROLANDO P
Address: 560 RIDGEWOOD ROAD
City-St-Zip: KEY BISCAYNE, FL 33149

Title: PSTD (X) Delete
Name: ROMANO, LAURA
Address: MAYLING CLUB DE CAMPO - UF 926
City-St-Zip: PILAR, BS 1629 AR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ANTONIO G. AGUIRRE

PSTD

07/17/2007

Electronic Signature of Signing Officer or Director

_____ Date