

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2008 8:00 am
Secretary of State

01-23-2008 90010 036 ***150.00

DOCUMENT # P03000108469 1. Entity Name AAUG BROKERAGE, INC.					
Principal Place of Business 110 E BROWARD BLVD. SUITE 2400 FT LAUDERDALE, FL 33301			Mailing Address 110 E BROWARD BLVD. SUITE 2400 FT LAUDERDALE, FL 33301		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip		Country		Zip	
Country		Country		4. FEI Number 20-2333847	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent RASSNER, WAYNE H 7700 N KENDALL DR STE 510 MIAMI, FL 33156			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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 accept the obligations of registered agent.			SIGNATURE _____ Signature, typed or printed name of registered agent and office (if applicable) (State Registered Agent signature required when reappointing) DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR GREGORY, GREGOR R MR. 4408 PIERCE ST HOLLYWOOD, FL 33021	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MGR CONTI, TAVO MR 1800 TYLER ST - #201 <i>110 E Broward Blvd #2400</i> HOLLYWOOD, FL 33020 <i>FT LAUD, FL 33301</i>	☐ Delete			
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered					
SIGNATURE: <i>Louis A Blas - Controller</i> 1/18/08 954-920-2772 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DATE Daytime Phone # LOUIS A. BLAS -					