

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000106766

FILED
Apr 29, 2006
Secretary of State

Entity Name: AMERICAN GOLD CONCENTRATE OF FLORIDA, INC.

Current Principal Place of Business:

21029 SW 85 PASSAGE
MIAMI, FL 33189

New Principal Place of Business:

Current Mailing Address:

21029 SW 85 PASSAGE
MIAMI, FL 33189

New Mailing Address:

FEI Number: 04-3128313

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

AB CONSULTING & ACCOUNTING SERVICES INC
6237 MIRAMAR PARKWAY
SUITE 200
MIRAMAR, FL 33023 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: P () Delete
Name: AMERICAN GOLD CONCEN, TRATE INC
Address: 331 FRANKLIN STREET
City-St-Zip: CAMBRIDGE, MA 02139

Title: VP () Delete
Name: CHANCY, FRANCOIS
Address: 331 FRANKLIN STREET
City-St-Zip: CAMBRIDGE, MA 02139

Title: SEC () Delete
Name: CHANCY, MYTCHELL
Address: 21029 SW 85 PASSAGE
City-St-Zip: MIAMI, FL 33189

Title: TREA () Delete
Name: BLEMUR, ANIS
Address: 6237 MIRAMAR PARKWAY
City-St-Zip: MIRAMAR, FL 33023

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 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: ANIS BLEMUR

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04/29/2006

Electronic Signature of Signing Officer or Director

Date