## 2009 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P04000110221

Address:

City-St-Zip:

FILED May 26, 2009 Secretary of State

Entity Nar	ne: AGENTS	' HOUSE INTERNATIONA	L, INC.				
Current Principal Place of Business:				New Principal Place of Business:			
	NIS STREET VILLE, FL 322	2041806					
Current Mailing Address:				New Mailing Address:			
2120 DENNIS STREET JACKSONVILLE, FL 322041806				630 W ADAMS STREET JACKSONVILLE, FL 32204			
FEI Number:	20-1485757	FEI Number Applied For ( )	FEI Nur	nber Not Appli	cable ( )	Certificate of Status Desire	ed ( )
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
SAINT AUG	ICULTURAL C GUSTINE, FL						
	named entity: of Florida.	submits this statement for t	the purpose o	of changing it	s registere	d office or registered agent,	or both,
SIGNATUR	RE:						
Electronic Signature of Registered Agent				Date			
		3(2)(b), F.S., the corporation d g Trust Fund Contribution ( ).	lid not receive t	the prior notice	<b>)</b> .		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	AVERY, RONA 2120 DENNIS			Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition SEPH P MS STREET ILLE, FL 32204	
Title: Name: Address: City-St-Zip:	KRALL, JOSEF 2120 DENNIS			Title: Name: Address: City-St-Zip:		(X) Change ( ) Addition SEPH P MS STREET ILLE, FL 32204	
Title: Name:		) Delete		Title: Name:	CH AVERY, RO	()Change(X)Addition NALD	

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.

Address:

City-St-Zip:

630 W ADAMS STREET

JACKSONVILLE, FL 32204

SIGNATURE: JOSEPH P KRALL **PRES** 05/26/2009