

FILED
Apr 18, 2005 8:00 am
Secretary of State

02-25-2005 90149 025 ***150.00

**2005 FOR PROFIT CORPORATION
 ANNUAL REPORT**

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DOCUMENT # P04000118218			
1. Entity Name AGR SOUTH EXPORTS, INC.			
Principal Place of Business 4801 NW 7TH ST #16-303 MIAMI, FL 33126 <i>2120 SW 71st Way Davie Florida - 33317</i>		Mailing Address 4801 NW 7TH ST #16-303 MIAMI, FL 33126	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
4. FEI Number 75-3166333		Applied For Not Applicable	
5. Certificate of Status Desired ☐		\$5.75 Additional Fee Required	
6. Name and Address of Current Registered Agent RÓDRIGUEZ, HUGO JESUS 4801 NW 7TH ST #16-303 MIAMI, FL 33126 <i>2120 SW 71st Way Davie Florida 33317</i>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) 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 accept the obligations of registered agent.			
SIGNATURE _____ Signature, name or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when withdrawing) DATE _____			
FILE NOW!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fee	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DPT RÓDRIGUEZ, HUGO JESUS 4801 NW 7TH ST #16-303 MIAMI, FL 33126 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Podriguez Hugo Jesus ☐ Change ☐ Addition 2120 SW 71st Way Davie Florida 33317
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVS BARRENECHEA, SELENA MAGALI 4801 NW 7TH ST #16-303 MIAMI, FL 33126 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Barrenechea Selena Magali ☐ Change ☐ Addition 2120 SW 71st Way Davie Florida 33317 Vice President
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), Florida Statutes. I further certify that the information disclosed 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 as changed, or on an attachment with an address, with all other officers empowered.			
SIGNATURE: <i>[Signature]</i>		Date: 2/22/05	