

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000133640

Entity Name: A,G,T, ,INC.

FILED  
Jan 16, 2007  
Secretary of State

**Current Principal Place of Business:**

169 MANISTEE DR  
PANAMA CITY BEACH, FL 32413 US

**New Principal Place of Business:**

1839 ROOSEVELT ST  
HOLLYWOOD, FL 33020 US

**Current Mailing Address:**

169 MANISTEE DR  
PANAMA CITY BEACH, FL 32413 US

**New Mailing Address:**

1839 ROOSEVELT ST  
HOLLYWOOD, FL 33020 US

FEI Number: 20-1655511

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

MANCINI, FRANK J  
2128 HOLLYWOOD BLVD  
HOLLYWOOD, FL 33020 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: THIBODEAU, DAVID  
Address: 169 MANISTEE DR  
City-St-Zip: PANAMA CITY BEACH, FL 32413 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: THIBODEAU, DAVID  
Address: 1839 ROOSEVELT ST  
City-St-Zip: HOLLYWOOD, FL 33020 US

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: DAVID THIBODEAU

P

01/16/2007

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date