2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000151502

Entity Name: A.G. CORP. USA.

FILED Jan 19, 2005 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

10800 NW 21ST STREET, UNIT 140 (#5) 10800 NW 21ST STREET DORAL, FL 331722058

UNIT #140

MIAMI, FL 33172

Current Mailing Address: New Mailing Address:

10800 NW 21ST STREET, 10800 NW 21ST STREET, UNIT 140 (#5) DORAL, FL 331722058

UNIT # 140

MIAMI, FL 33172 US

FEI Number: 20-1841694 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

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

GOMEZ, ALEJANDRO GOMEZ, ALEJANDRO 10800 NW 21ST STREET, UNIT 140 (#5) 10800 NW 21ST STREET

DORAL, FL 331722058 ÚS UNIT # 140 MIAMI, FL 33172 US

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: ALEJANDRO GOMEZ 01/19/2005

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

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

Title: () Delete Title: (X) Change () Addition

GOMEZ, ALEJANDRO Name: Name: GOMEZ, ALEJANDRO

10800 NW 21ST STREET, UNIT 140 (#5) 10800 NW 21ST STREET - UNIT 140 Address: Address:

City-St-Zip: DORAL, FL 331722058 City-St-Zip: MIAMI, FL 33172

Title: TD (X) Change () Addition Title: () Delete Name: OSPINO, MARCOS Name: OSPINA, MARCO

10800 NW 21ST STREET, UNIT 140 (#5) 10800 NW 21ST STREET - UNIT 140 Address: Address:

DORAL, FL 331722058 City-St-Zip: MIAMI, FL 33172 City-St-Zip:

Title: Title: SD () Delete SD (X) Change () Addition CORTES, ADRIANA Name: CORTES, LUZ A Name:

10800 NW 21ST STREET, UNIT 140 (#5) Address: 10800 NW 21ST STREET - UNIT # 140 Address:

City-St-Zip: DORAL, FL 331722058 City-St-Zip: MIAMI, FL 33172

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: ALEJANDRO GOMEZ PD 01/19/2005