## 2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

## **FILED** Mar 26, 2007 08:00 AM **DOCUMENT # P05000004728 Secretary of State** 1. Entity Name AGDF ENTERPRISES, INC. Principal Place of Business Mailing Address 2305 SHADY OAK ROAD 2305 SHADY OAK ROAD MELBOURNE, FL 32935 MELBOURNE, FL 32935 No Chg-P CR2E034 (11/05) 01292007 DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 43-2071439 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent MOMMERS, PIERRA A ESQ DO NOT WRITE 2351 W EAU GALLIE BLVD SUITE 1 MELBOURNE, FL 32935 IN THIS SPACE 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, typed or printed name of registered agent and fire it applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE GRECO, ALFRED NAME 2305 SHADY OAK ROAD STREET ADDRESS CITY-ST-ZIP MELBOURNE, FL 32935 TITLE NAME STREET ADDRESS 04/03/07-80035-003 150.00 CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS

12. I heroby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 110, Florida Statutes, I further certify that the information indicated on this report or supplemental report is true and accurate and that my signalure 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 if changed, or on an attachment with an address, with all other like empowered.

C11Y-ST-71P TITLE NAME STREET ADDRESS CITY-ST-ZIP

3-21-07

321-5362720