

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000020923

Entity Name: A.G. CASH #2 INC.

FILED
Jan 28, 2009
Secretary of State

Current Principal Place of Business:

8133 WEST 8TH AVENUE
HIALEAH, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

8133 WEST 8TH AVENUE
HIALEAH, FL 33014 US

New Mailing Address:

FEI Number: 20-4347273

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUZMAN, ARIEL
6776 ORCHID DR
MIAMI LAKES, FL 33014 US

Name and Address of New Registered Agent:

GUZMAN, ARIEL
7516 W 4TH LANE
HIALEAH, FL 33014 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: ARIEL GUZMAN

01/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUZMAN, ARIEL
Address: 6776 ORCHID DR
City-St-Zip: MIAMI LAKES, FL 33014 US

Title: SEC () Delete
Name: GUZMAN, NESTOR
Address: 7516 W 4TH LANE
City-St-Zip: HIALEAH, FL 33014 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GUZMAN, ARIEL
Address: 7516 W 4TH LANE
City-St-Zip: HIALEAH, FL 33014 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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.

SIGNATURE: ARIEL GUZMAN

P

01/28/2009

Electronic Signature of Signing Officer or Director

Date