

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000090602

Entity Name: AAGR, INC.

FILED  
May 05, 2009  
Secretary of State

## Current Principal Place of Business:

317 N COLLIER BLVD - # 202  
MARCO ISLAND, FL 34145

## New Principal Place of Business:

## Current Mailing Address:

317 N COLLIER BLVD - # 202  
MARCO ISLAND, FL 34145

## New Mailing Address:

FEI Number: 20-5173622

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

HAUSLER, GARY J ESQ  
950 N COLLIER BLVD  
STE 301  
MARCO ISLAND, FL 34145 US

## Name and Address of New Registered Agent:

BENARROCH, GLADYVETTE  
317 N. COLLIER BLVD  
SUITE 202  
MARCO ISLAND, FL 34145 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: GLADYVETTE BENARROCH

05/05/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( )

## OFFICERS AND DIRECTORS:

Title: D ( ) Delete  
Name: BENARROCH, ARMEN  
Address: 317 N COLLIER BLVD - # 202  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D ( ) Delete  
Name: BENARROCH, ALBERT  
Address: 317 N COLLIER BLVD - # 202  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D ( ) Delete  
Name: BENARROCH, RUTH T  
Address: 317 N COLLIER BLVD - # 202  
City-St-Zip: MARCO ISLAND, FL 34145

Title: D ( ) Delete  
Name: BENARROCH, GLADYVETTE  
Address: 317 N COLLIER BLVD - # 202  
City-St-Zip: MARCO ISLAND, FL 34145

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: GLADYVETTE BENARROCH

D

05/05/2009

Electronic Signature of Signing Officer or Director

Date