

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000143667

FILED
Apr 20, 2007
Secretary of State

Entity Name: AMERICAN GLOBAL SOLUTIONS, INC.

Current Principal Place of Business:

10740 WASHINGTON ST. BLDG 5 STE 107
PEMBROKE PINES, FL 33025

New Principal Place of Business:

Current Mailing Address:

10740 WASHINGTON ST. BLDG 5 STE 107
PEMBROKE PINES, FL 33025

New Mailing Address:

FEI Number: 20-5902118

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MONTI, LUIS
10740 WASHINGTON ST. BLDG 5 STE 107
PEMBROKE PINES, FL 33025 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: DP () Delete
Name: MONTI, LUIS
Address: 10740 WASHINGTON ST. BLDG 5 STE 107
City-St-Zip: PEMBROKE PINES, FL 33025

Title: DS () Delete
Name: LEON, ELSA
Address: 10740 WASHINGTON ST. BLDG 5 STE 107
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: LUIS MONTI

PD

04/20/2007

Electronic Signature of Signing Officer or Director

Date