

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000071282

FILED
Jan 07, 2009
Secretary of State

Entity Name: AGS REAL ESTATE HOLDINGS, INC.

Current Principal Place of Business:

16445 COLLINS AVE
UNIT 721
MIAMI BEACH, FL

New Principal Place of Business:

16445 COLLINS AVE
UNIT 1421
SUNNY ISLES, FL 33160

Current Mailing Address:

P.O. BOX 165539
MIAMI, FL 331165539 US

New Mailing Address:

290 NW 165TH STREET
M-400
MIAMI, FL 331169 US

FEI Number: 65-0445236

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GROSSMAN, JEROME
290 NW 165 STREET STE M-400
MIAMI, FL 33165 US

Name and Address of New Registered Agent:

DA SILVA, ALVARO A
290 NW 165 STREET STE M-400
MIAMI, FL 33169 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: ALVARO A. DA SILVA

01/07/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: DA SILVA, SALUSTIANO C
Address: 16445 COLLINS AVE UNIT 721
City-St-Zip: MIAMI BEACH, FL

Title: D () Delete
Name: DA SILVA, ELIDIA H
Address: 16445 COLLINS AVE UNIT 721
City-St-Zip: MIAMI BEACH, FL

Title: P () Delete
Name: DASILVA, ALVARO A
Address: 290 NW 165 ST STE M-400
City-St-Zip: MIAMI, FL 33169

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: DA SILVA, SALUSTIANO C
Address: 16445 COLLINS AVE UNIT 721
City-St-Zip: SUNNY ISLES, FL 33160

Title: D (X) Change () Addition
Name: DA SILVA, ELIDIA H
Address: 16445 COLLINS AVE UNIT 721
City-St-Zip: SUNNY ISLES, FL 33160

Title: P (X) Change () Addition
Name: DA SILVA, ALVARO A
Address: 290 NW 165 ST STE M-400
City-St-Zip: MIAMI, FL 33169

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: ALVARO A. DA SILVA

P

01/07/2009

Electronic Signature of Signing Officer or Director

Date