2009 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2009
Secretary of State

DOCUMENT# P95000041615

Entity Name: A.G. TECHNOLOGIES, INC.

Current Principal Place of Business:

1254 OLD OKEECHOBEE RD
WEST PALM BEACH, FL 33401 US

New Principal Place of Business:

1254 OKEECHOBEE RD
WEST PALM BEACH, FL 33401 US

Current Mailing Address:

1254 OLD OKEECHOBEE RD
WEST PALM BEACH, FL 33401 US

New Mailing Address:

1254 OKEECHOBEE RD
WEST PALM BEACH, FL 33401 US

FEI Number: 65-0582903 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BURDICK, GEOFFREY C
1110 N. OLIVE AVENUE
WEST PALM BEACH, FL 33401 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: PD ( ) Delete
Name: SANCHEZ, RORY V
Address: 2730 MEADOWLARK LANE
City-St-Zip: WEST PALM BEACH, FL 33409

Title: VD ( ) Delete
Name: HOCHMUTH, ROBERT
Address: 5600 N FLAGLER DR #2510
City-St-Zip: WEST PALM BEACH, FL 33407

Title: TD ( ) Delete
Name: SANCHEZ, MADELINE
Address: 5020 FOXHALL DR N
City-St-Zip: WEST PALM BEACH, FL 33417

Title: D ( ) Delete
Name: DAVIS, CRAIG
Address: 6317 HOLLANDAIRE DR E
City-St-Zip: BOCA RATON, FL 33433

Title: SD ( ) Delete
Name: DAVIS, TANIA
Address: 6317 HOLLANDAIRE DR E
City-St-Zip: BOCA RATON, FL 33433

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:

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: MADELINE SANCHEZ TD 04/03/2009
Electronic Signature of Signing Officer or Director Date