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Apr 11 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000014857 (2)

1. Corporation Name

AGA TRANSMISSIONS, INC.

Principal Place of Business

2417 S. DIXIE HIGHWAY  
WEST PALM BEACH FL 33401

Mailing Address

2417 S. DIXIE HIGHWAY  
WEST PALM BEACH FL 33401-7835

3. Date Incorporated or Qualified

02/14/1996

3a. Date of Last Report

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

65-0734029

Applied For

Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒

Yes ☐ No

9. Name and Address of Current Registered Agent

KELLER PARA-LEGAL SERVICES, INC.  
4480 CARVER STREET  
LAKE WORTH FL 33461

10. Name and Address of New Registered Agent

81 Name

Dalia Melendez

82 Street Address (P.O. Box Number is Not Acceptable)

680 S. Military Tr

83

84 City

West Palm Bch

FL

85 Zip Code

33415

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

03/15/97

12. OFFICERS AND DIRECTORS

TITLE PD  
NAME GODINEZ, ALFREDO  
STREET ADDRESS 5055 PALM HILL DR  
CITY-ST-ZIP WEST PALM BEACH FL 33415

TITLE VD  
NAME ABDULLAH, SAMIR ELIAS  
STREET ADDRESS 300 VIENNA DRIVE #F118  
CITY-ST-ZIP PALM SPRINGS FL 33461

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE Godinez, Alfredo  
1.2 NAME  
1.3 STREET ADDRESS 325 LUGAR CT  
1.4 CITY-ST-ZIP West Palm Beach, FL 33415

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/15/97

Date

(561) 835-0206

Daytime Phone #

0295800

CR2E034 (9/96)