

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2004 8:00 am
Secretary of State

05-03-2004 90676 009 ***150.00

DOCUMENT # P96000030002

1. Entity Name
AMG USA, INC.



Principal Place of Business
2905 CARRIER AVE
SANFORD, FL 32773 US

Mailing Address
2905 CARRIER AVE
SANFORD, FL 32773 US

94079037



04242004 No Chg-P CR2E034 (10/03)

4. FEI Number
59-3117860

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

CORPDIRECT AGENTS
103 N. MERIDIAN STREET, LOWER LEVEL
TALLAHASSEE, FL 32301

**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME HARREITER, RICHARD
STREET ADDRESS AIRLINE MANAGEMENT HOLDINGS LTD.
CITY-ST-ZIP HORLEY, SURREY U.K.,

TITLE D
NAME HOWE, CHRISTINA I
STREET ADDRESS 7000 SW 113TH TERRACE
CITY-ST-ZIP MIAMI, FL 33156

TITLE STD
NAME BROADLEY, GERALDINE B
STREET ADDRESS 116 LUMLEY ROAD
CITY-ST-ZIP HORLEY, SURREY U.K.,

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**DO NOT WRITE
IN THIS SPACE**

12. I 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Richard Harreiter Becker Harreiter April 29, 2004 011.44.1293.433767
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #