

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 27, 2005 8:00 am**  
**Secretary of State**

04-27-2005 90276 034 \*\*\*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

14001717



2. Principal Place of Business  
2909 Carrier Ave.  
Suite, Apt. #, etc.

3. Mailing Address  
2909 Carrier Ave.  
Suite, Apt. #, etc.

04202005 Chg-P CR2E034 (10/03)

City & State  
Sanford, Florida  
Zip Country  
32773 USA

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Sanford, Florida  
Zip Country  
32773 USA

4. FEI Number  
59-3117860  
Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

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

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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, 2005 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 ☐ Delete  
STREET ADDRESS AIRLINE MANAGEMENT HOLDINGS LTD.  
CITY-ST-ZIP HORLEY, SURREY U.K.,

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

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 Richard Harreiter 04/25/2005  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #