

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 21, 2000 8:00 am
Secretary of State

02-21-2000 90023 045 ***150.00

DOCUMENT # P96000054303
 i. Entity Name
ANG RESOURCES, INC.

714806



DO NOT WRITE IN THIS SPACE

Principal Place of Business		Mailing Address	
S OCEAN BLVD 605 BEACH FL 33480		19355 TURNBERRY DR. - 7F AVENTURA FL 33180-2533	
Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number	65-0771993	Applied For	<input type="checkbox"/>
		Not Applicable	<input type="checkbox"/>
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

GARDNER, ALBERT
19355 TURNBERRY WAY
7F
AVENTURA FL 33180

7. Name and Address of New Registered Agent

Name **LEONARD MERCER**

Street Address (P.O. Box Number is Not Acceptable)
2560 SO OCEAN BOULEVARD

SUITE 605

City **PALM BEACH** FL Zip Code **33480**
~~33450~~

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.

Albert Gardner

SIGNATURE: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

9. This corporation is eligible to satisfy its intangible tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
<input type="checkbox"/> Delete	D GARDNER, ALBERT N 19355 TURNBERRY WAY 7F AVENTURA FL 33180	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	D - V.P. LEONARD MERCER 2560 SO. OCEAN BOULEVARD PALM BEACH FL 33450 33480
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Delete		<input type="checkbox"/> Change <input type="checkbox"/> Addition	

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

SIGNATURE: *Albert Gardner* **ALBERT GARDNER** Date: **2/14/00** Daytime Phone #: **561-5881325**

CR2E034 (9/99)