

2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
May 09, 2006 8:00 am
Secretary of State

05-09-2006 90075 005 ***150.00

40089496



04282006 Chg-P CR2E034 (11/05)

4. FEI Number **65-0851763** Applied For ☐ Not Applicable

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

DOCUMENT # P96000075963
1. Entity Name
A G & M ENTERPRISES CORP.



Principal Place of Business
**5456 W 16 AVE
HIALEAH, FL 33012 US**

Mailing Address
**5456 W 16 AVE
HIALEAH, FL 33012 US**

2. Principal Place of Business
5496 W 16 AVE

3. Mailing Address
5496 W 16 AVE

Suite, Apt. #, etc.

City & State
HIALEAH, FL

City & State
HIALEAH, FL

Zip
33012

Country

Zip
33012

Country

6. Name and Address of Current Registered Agent

**MALVAREZ, MARTHA
590 EAST 52 T.
HIALEAH, FL 33013**

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 DATE

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PT MALVAREZ, MARTHA 10352 SW 5 ST MIAMI, FL 33174 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Addition

TO WHOM IT MAY CONCERN,

WE ARE SENDING THE ANNUAL REPORT TODAY, BUT WE DID NOT RECEIVED ANY PREVIOUS NOTICE TO FILE THE ANNUAL REPORT. WE WANTED TO KINDLY LET YOU KNOW THIS SINCE YOU ARE NOW CHARGING \$400 EXTRA AFTER MAY 1ST.

PLEASE MAKE A NOTE OF THIS AND ACCEPT OUR PAYMENT OF \$150 AND THE REPORT.

THANK YOU.

AG&M ENTERPRISES, CORP.

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: DATE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ATTACHMENT

40089496

**CRUZ, GORRIAS & ASSOCIATES
ACCOUNTING & TAX SERVICES, INC.
7175 S.W. 8TH STREET, SUITE 216
MIAMI, FLORIDA 33144
PHONE: (305) 262-8292
FAX: (305) 262-0151**

Mayo 2, 2006

A: AG&M Enterprises, Corp.

Estimada Martha,

Aquí le enviamos la información que usted necesita para mandar el Reporte Anual de la compañía. Junto con el reporte-le estoy enviando otro reporte para que el gobierno sepa que la compañía no recibió ninguna notificación antes de Mayo 1ro y no apliquen la penalidad.

Por favor incluya la siguiente información en el cheque y envíelo junto con los reportes lo antes posible:

- **Cheque pagadero a:** Florida Department of State
- **Cantidad:** \$150.00
- **Document No.:** P96000075963
- **EIN#:** 65-0851763

Envíe los reportes y el cheque a la siguiente dirección:

Division of Corporation
P.O. Box 1500
Tallahassee, FL 32302-1500

Si tiene alguna pregunta, por favor llámenos a la oficina y con gusto la ayudaremos.

Sinceramente,

Cruz Gorrias and Associates.



ATTACHMENT
40089496
Division of Corporations

2006 Annual Report

**Listed below is the most recent information reported for the entity.
Please review and click the appropriate button at the bottom to generate the annual
report form.**

This information cannot be changed on the report.	
Document Number	P96000075963
Business Entity Name	A G & M ENTERPRISES CORP.
Original File Date	09/12/1996

FEI Number 65-0851763
Principal Address 5456 W 16 AVE
HIALEAH, FL 33012 US
Mailing Address 5456 W 16 AVE
HIALEAH, FL 33012 US
Registered Agent MARTHA MALVAREZ
590 EAST 52 T.
HIALEAH, FL 33013 US

Officer/Director Name And Address

PT
MARTHA MALVAREZ
10352 SW 5 ST
MIAMI, FL 33174

☒ **After May 1 of each year, a late charge of \$400.00 is imposed, except in
circumstances in which the entity did not receive prior notice. Please check
this box if notice was not received.**

If all of the above
information is correct and
you do not wish to make any
changes, please select:

No Changes

If you need to make changes
to the above information,
please select:

Make Changes