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TRANSMITTAL LETTER

TO: A

Amendment Section

Division of Corporations

SUBJECT:

A.G. BUILDERS, INC.

DOCUMENT NUMBER:

P96000086775

The enclosed Statement of Change of Registered Office/Agent and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Michael D. Mopsick, Esq.

Buckingham, Doolittle & Burroughs, LLP
2500 N. Military Trail, Suite 480

Boca Raton, FL 33431

For further information concerning this matter, please call:

Michael Mopsick at 561-241-0414

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address:

Amendment Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

Street Address:

Amendment Section Division of Corporations 409 E. Gaines Street Tallahassee, FL 32399

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

		1.1508, Florida Statutes, this statement of
	n organized under the laws of the State (istered agent, or both, in the State of Flo	
to change its registered office or reg.	sierea agent, or voin, in the state of r to	ricii.
1. The name of the corporation:	A.G. BUILDERS, INC.	
2. The principal office address:	499 NW 53rd Street	
	Boca Raton, FL 33487	
3. The mailing address (if different):		
4. Date of incorporation/qualification	n:10/21/1996 Document nu	mber: P96000086775
5. The name and street address of the Florida Department of State:	current registered agent and registered	office on file with the
	k, Michael D	
2500 N	. Military Trail, Suite 480	
Boca R	aton, FL 33431	
	2001, 12 00 101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
The name and street address of the (if changed);	new registered agent (if changed) and /	or registered office
BDB AG	ENT CO.	Į O
2500 N	. Military Trail, Suite 480	LAN FI
	(P.O. Box or personal mailbox NOT acceptable)	A B 1
Boca R	aton, FL 33431	SS N
The street address of its registered changed will be identical.	office and the street address of the busi	ness office of its registered agent,
Such change was authorized by resonne board, or the corporation has be	olution duly adopted by its board of di- en notified in writing of the change.	rectors or by an office authorized by
16-0-		lejandro,Gomez, President
Livereby accept the appointment as I further agree to comply with the p duties, and I am familiar with and a being filed merely to reflect a chan been notified in writing of this chan	registered agent and agree to act in th rovisions of all statutes relative to the rocept the obligation of my position as ge in the registered office address. I he	(Printed or typed name and little) is capacity. proper and complete performance of my registered agent. Or, if this document is reby confirm that the corporation has
(Signature of Registered A	gent)	(Date)
If signing on behalf of an entity:		
(Mundersin	l	VP
(Typed on Printed Name) MICHAEL MOSS	CR	(Capacity)

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314

* * * FILING FEE: \$35.00 * * *