

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 21, 2001 8:00 am
Secretary of State

03-21-2001 90073 035 ***150.00

DOCUMENT # P97000038529

1. Entity Name
A.M.D.G. CORPORATION, INC.

Principal Place of Business **NORTHWEST**
4945 NW 116 AVE
CORAL SPRINGS FL 33076-3206
US

Mailing Address **c/o GRUBER AND ASSOCIATES**
1650 SOUTHEAST 17TH STREET
SUITE # 301
FORT LAUDERDALE FL 33316-1735
US

B0021416



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
4945 Northwest 116th Avenue
 Suite, Apt. #, etc.

3. Mailing Address
c/o GRUBER AND ASSOCIATES, P.A.
 Suite, Apt. #, etc.

City & State

4. FEI Number **65-0772855** Applied For Not Applicable

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

3. Zip **33076-3206** Country **US** Zip **33316-1735** Country

6. Name and Address of Current Registered Agent
SANTORO, JOSEPH P.
4945 NORTHWEST 116TH STREET
CORAL SPRINGS FL 33076-3206

7. Name and Address of New Registered Agent
 Name **P.**
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code **33076-3206**

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.

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

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, 2001 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**

11. OFFICERS AND DIRECTORS		12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE	VPSD SANTORO, EARLINE R. 4945 NORTHWEST 116TH STREET CORAL SPRINGS FL 33076 - 3206	TITLE	R. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 33076-3206
TITLE	PTD SANTORO, JOSEPH P. 4945 NORTHWEST 116TH STREET POMPANO BEACH FL 33076 - 3206	TITLE	P. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 33076-3206
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition

13. 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 another individual empowered.

SIGNATURE: **Joseph P. Santoro** **JOSEPH P. SANTORO** 3/19/01, 954522 2222
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (1/0/00)