2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Jan 11, 2007 08:00 AM Secretary of State **DOCUMENT # P97000081520** 1. Entity Name A.G. ELITE CORP. Mailing Address Principal Place of Business 10225 COLLINS AVE 10225 COLLINS AVE APT #501 APT #501 BAL HARBOUR, FL 33154 BAL HARBOUR, FL 33154 01072007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number 58-2351106 \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent GIMBEL, SIDNEY DO NOT WRITE 10225 COLLINS AVE **APT 501** IN THIS SPACE BAL HARBOUR, FL 33154 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2007 Fee will be \$550.00 10. OFFICERS AND DIRECTORS MLE GIMBEL, SIDNEY NAME 10225 COLLINS AVE, APT 501 STREET ADORESS BAL HARBOUR, FL 33154 CITY-ST-ZIP 000000583692 01/12/07-80007-009 150.00 NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS.

DO NOT WRITE IN THIS SPACE

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 suppliemental 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 of director of the corporation or the receiver of director of the corporation of the corporation of the corporation of the receiver of director of director of the receiver of director of the receiver of director of the receiver of director of director of director of director

SIGNATURE:

CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP

NAME STREET ADDRESS CITY-ST-ZIP HILE NAME STREET ADDRESS CITY-ST-ZIP

Applied For

Not Applicable