2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

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Feb 23, 2004 8:00 am Secretary of State DOCUMENT # P97000081841 1. Entity Name 02-23-2004 90061 023 ***150 00 AGI SOLUTIONS, INC Principal Place of Business Mailing Address . W., STE. 203 4509 14TH ST 4023 SAWYER ROAD コモリエマエ・マ 34207 BRADENTON SARASOTA FL 34233 2. Principal Place of Business 3. Mailing Address Suite, Apt. #J Suite, Apt. # CR2E034 (11/03) Applied For 65-0783466 Not Applicable \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DANNELS, SUE Street Address (P.O. Box Number is Not Acceptable) 3736 BOND PLACE SARASOTA FL 34232 Zip Code City 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 (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Added to Fees Trust Fund Contribution. Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. TITLE ☐ Addition TITLE SWEENEY, CHRISTOPHER D NAME NAME 4509 14TH ST., W., STE. 203 STREET ADDRESS STREET ADDRESS **BRADENTON FL 34207** CITY-ST-ZIP CITY-ST-7IP TITLE TITLE NAME DANNELS, WILLIAM NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Addition TITLE NAME NAME 4TH ST., W., STE. 203-441/ BEERIGGE STREET ADDRESS 4411 BEE CITY-ST-7(P CITY-ST-ZIP ☐ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ Delete TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. 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 10 or Block 11 if changed, or on an atlachment with an address, with all other like empowered.

FILED