

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 90707 009 ***150.00

0042545 AV

DOCUMENT # P98000083925

1. Entity Name
A&G PROPERTIES, INC.

Principal Place of Business
~~20530 SOUTHWEST 51ST STREET~~
FORT LAUDERDALE FL 33332

Mailing Address
~~20530 SOUTHWEST 51ST STREET~~
FORT LAUDERDALE FL 33332

2. Principal Place of Business
4474 Weston Rd
 Suite, Apt. #, etc.
162

3. Mailing Address
4474 Weston Rd
 Suite, Apt. #, etc.
162

City & State
Weston, FL

City & State
Weston, FL

Zip
33331

Country

Zip
33331

Country

4. FEI Number **65-0871387**

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent

HALL, GABRIELA
20530 SOUTHWEST 51ST STREET
FORT LAUDERDALE FL 33332

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

4474 Weston Rd

Suite 162

City **Weston**

FL Zip Code **33331**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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, 2002 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

TITLE **D** ☐ Delete
 NAME **GUTMAN, ARIE**
 STREET ADDRESS ~~20530 SOUTHWEST 51ST STREET~~
 CITY-ST-ZIP **FORT LAUDERDALE FL 33332**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS **4474 Weston Rd, #162**
 CITY-ST-ZIP **Weston, FL 33331**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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 CITY-ST-ZIP

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1-02 954-253-5298
 Date Daytime Phone #

CR2E034 (9/01)