2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# S48516

Name:

Address:

City-St-Zip:

CLOUGH, LAWRENCE R

PORTLAND, ME 04112 US

3 CANAL PLAZA, PO BOX 15060

Entity Name: A.G. CAR CO., INC

FILED Apr 17, 2009 Secretary of State

Littly Nai	IIIe. A.G. CAI	CO., INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
1830 NE 1 MIAMI, FL					
Current Mailing Address:			New Mailing Address	New Mailing Address:	
16375 NE #300	18 AVE				
MIAMI, FL	33162 US				
FEI Number:	: 65-0257071	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
16375 NE #300 MIAMI, FL The above	33162 US named entity of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
Electronic Signature of Registered Agent			gent	 Date	
Election Car	npaign Financir	ng Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	GIRARD, ARTI 9901 EAST BA) Delete HUR P NY HARBOR DR STE 1 ISLAND, FL 33154	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	GIRARD, MICH 9901 EAST BA) Delete HAEL J IY HARBOR DR STE 5 ISLAND, FL 33154	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title:	S () Delete	Title:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: ARTHUR P. GIRARD D 04/17/2009