

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

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4/11/95 9:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra H. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **S83763** (0)
1. Corporation Number
A.&G. POWER & LIGHTING INC.

Principal Place of Business: **40 SOUTHWEST 34TH AVENUE MIAMI FL 33135**
Mailing Address: **40 SOUTHWEST 34TH AVENUE MIAMI FL 33135**

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified: **09/30/1991** 3a. Date of Last Report: **04/15/1994**

4. FEI Number: **65-0288680** Applied For: Not Applicable

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

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. Has corporation that operates the international telephone service? Yes No

2. Principal Place of Business: **21** 2a. Mailing Address: **26**

State, Apt # etc: **22** State, Apt # etc: **27**

City & State: **23** City & State: **28**

City: **24** State: **25** City: **29** State: **30**

9. Name and Address of Current Registered Agent

SANCHEZ, JANET
1790 W 49TH STREET
#215
HIALEAH FL 33012

10. Name and Address of New Registered Agent

B1 Name: _____
B2 Street Address (if P.O. Box Number is Not Applicable): _____
B3 _____
B4 City: _____ FL B5 Zip Code: _____

11. Pursuant to the provisions of Sections 607.0402 and 607.0403, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or its registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.0403, Florida Statutes.

SIGNATURE: _____

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN: | |
|----------------------------|--|--|---|
| OFFICER | DVS LEIVA, ALBERTO 1869 SW 5TH ST. MIAMI FL | 1. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | DP LOPEZ, GILBERT 40 SW 34TH AVE. MIAMI FL | 2. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | | 3. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | | 4. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | | 5. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | | 6. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | | 7. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| OFFICER | | 8. NAME | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

14. I, the undersigned, certify that the information supplied with this report is voluntarily prepared and furnished equally for the reasons stated in Sections 607.0402 and 607.0403, Florida Statutes. I further certify that the information included on this official report or supplemental annual 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 responsible officer empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears on Block 13 of Block 13 of this report or on an affidavit filed with this report.

SIGNATURE: *Silk*
SIGNATURE AND TYPED ON PRINTED NAME OF LEADING OFFICER OR DIRECTOR

4/11/95