

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Apr 08 1998 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # V39255 (7)  
1. Corporation Name  
AG INTERNATIONAL CONSULTING, INC.



Principal Place of Business  
4910 CREEKSIDE DR  
STE N  
CLEARWATER FL 34625  
US

Mailing Address  
4910 CREEKSIDE DR  
STE N  
CLEARWATER FL 34625  
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		05/28/1992	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-3126596	
24 Country		29 Country		Applied For	
30		31		Not Applicable	

5. Certificate of Status Desired		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.	
<input type="checkbox"/>		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
6. Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
<input type="checkbox"/>		<input type="checkbox"/>	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
BANG, ODD R 112 5TH ST E TIERRA VERDE FL 33715		81 Name	
		82 Street Address (P.O. Box Number is Not Acceptable)	
		83	
		84 City	
		FL 85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP	1.1 TITLE	P
NAME	BANG, ODD R.	1.2 NAME	
STREET ADDRESS	112 5 ST E	1.3 STREET ADDRESS	
CITY - ST - ZIP	TIERRA VERDE FL	1.4 CITY - ST - ZIP	
TITLE	T	2.1 TITLE	VP
NAME	DISALVO, MICHAEL J.	2.2 NAME	
STREET ADDRESS	4255 W HUMPHREY ST., #1723	2.3 STREET ADDRESS	
CITY - ST - ZIP	TAMPA FL	2.4 CITY - ST - ZIP	
TITLE	P	3.1 TITLE	
NAME	MAPES, ROY	3.2 NAME	
STREET ADDRESS	8763 MATHEW ST	3.3 STREET ADDRESS	
CITY - ST - ZIP	SEMINOLE FL	3.4 CITY - ST - ZIP	
TITLE		4.1 TITLE	T
NAME		4.2 NAME	DANIEL H. WAGNER
STREET ADDRESS		4.3 STREET ADDRESS	225 EDGEWATER
CITY - ST - ZIP		4.4 CITY - ST - ZIP	DUNEDIN, FL
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. 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 annual 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ODD BANG

4/1-98

813-521-1099

Date Daytime Phone • 0000780

CR2E034 (10/97)