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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # V59109

(1)

1, Corporation Name

A.G.E.	INDUSTRIES, INC.									
Principal Place	of Business	Mailing Address				-		99119 1811 81811 1	14811 A1811 A18	Bid Brête 340an 100a
	eth avenue Rings FL 33065	3820 NW 126TH AVENUE CORAL SPRINGS FL 33065								
						3.	Date Incorporated or Qualified 08/20/1992		of Last Re 04/21/19	
2. Principal Pla 21	ce of Business	2a. Mailing Address 26			4.	FEI Number 65-0348259	Applied For Not Applicable			
Suite, Apt. #	, etc.	Suite, Apt. #, elc.			5.	Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		Oity & State			6.	Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip	Country	Ζp	Cou	ıntry		8.	This corporation has liability to		ax under s	199.032,
24	25	29	30				Florida Statutes Ye			
	g. Name and Address of Current	Registered Agent				10.	Name and Address of New	Registered	Agent	
00100	COO MIDDE			81	Name			,. <u></u>		
	ierg, andrea Iw 126th avenue			82	Street A	Address (P.	ress (P.O. Box Number is Not Acceptable)			
	SPRINGS FL 33065			83						
				84	City			FL	85 Zq	p Code
familiar with	ad agent, or both, in the State of Florid and accept the obligations of, Sections Signature, typed or printed name of registered agent.	on 607.0505, Florida Statutes	200	<u>O</u> E	eG	equired when re		4/JJATE	146	
12.	OFFICERS AND	DIRECTORS	13.				ADDITIONS/CHANGES TO OF			
TITLE	D	☐ DELETE	1. 1	TITLE					Change	☐ Addition
NAME	GOLDBERG, ANDREA		1.2 h	IAME						1
STREE1 ADDRESS	3820 NW 126TH AVENUE				ADDRESS					
CITY-ST-ZIP	CORAL SPRINGS FL			1.4 CITY-ST-ZIP					<u> </u>	- Iddilaa
TITLE	D	☐ DELETE	1	TITLE					Change	Addition
NAME	GOLDBERG, ERIC			IAME						
STREET ADDRESS	3820 NW 126TH AVENUE CORAL SPRINGS FL				ADDRESS	}				
CITY-ST-ZIP TITLE	CONAL SPRINGS PL	☐ DELETE		TITLE	1 - ZIP				Change	Addition
NAME				NAME						
STREET ADDRESS					ADDRESS					
CITY-S1-7IP				CITY-S	j	İ				
TITLE		DELETE		TITLE					Change	Addition
NAME			421	NAME						
STREET ADDRESS			4.3 5	STREET	ADDRESS					
CITY-ST-ZIP				CITY-S						
TITLE		☐ DELETE	5 1	TITLE]			Change	☐ Addition
NAME			5.21	MAME						
STREET ADDRESS			5.3 3	STREET	ADDRESS	[
CITY-ST-ZIP			5.4 (CITY - S	T - Z IP					
TITLE		DELETE	6 1	TITLE		_			☐ Change	☐ Addition
NAME			6.21	NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					

14. I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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: Order Could a Statutes of the corporation or the corporation or 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.

CR2E034 (12/95)