

2017 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K94926

Entity Name: AG HOLDINGS, INC.**Current Principal Place of Business:**4601 SHERIDAN STREET
5TH FLOOR
HOLLYWOOD, FL 33021**Current Mailing Address:**4601 SHERIDAN STREET
SUITE #500
HOLLYWOOD, FL 33021 US**FEI Number:** 65-0122351**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY
1201 HAYS STREET
SUITE 105
TALLAHASSEE, FL 32301 US*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:**_____
Electronic Signature of Registered Agent_____
Date**Officer/Director Detail :**

Title	PRESIDENT, DIRECTOR
Name	BEN-AVIV, MATAN
Address	4601 SHERIDAN STREET SUITE #500
City-State-Zip:	HOLLYWOOD FL 33021

Title	TREASURER, VP, DIRECTOR
Name	LICHTMAN, HARVEY L
Address	4601 SHERIDAN STREET SUITE #500
City-State-Zip:	HOLLYWOOD FL 33021

Title	SECRETARY
Name	MARTINEZ, VILMA
Address	4601 SHERIDAN STREET SUITE #500
City-State-Zip:	HOLLYWOOD FL 33021

Title	DIRECTOR
Name	BEN-AVIV, ZIPORA
Address	4601 SHERIDAN STREET SUITE #500
City-State-Zip:	HOLLYWOOD FL 33021

Title	DIRECTOR
Name	KATSAV, GUY
Address	4601 SHERIDAN STREET SUITE #500
City-State-Zip:	HOLLYWOOD FL 33021

I hereby 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 all other like empowered.

SIGNATURE: VILMA MARTINEZ**SECRETARY****04/27/2017**_____
Electronic Signature of Signing Officer/Director Detail_____
Date