2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 18, 2005 8:00 am Secretary of State

DOCUMENT # P0000015009 1. Entity Name S & G PRODUCTS, CORP.					Secretary of State 04-18-2005 90295 018 ***150.00			
Principal Place of Business 900 RIVER REACH DR., #120 FT. LAUDERDALE, FL 33315		Mailing Address 941 SE 20TH STREET MAIL BOX C-4 FORT LAUDERDALE, FL 33316				60% 60% 60% 88% 18	1 COLUMNO DE LOS DE	
2. Principal Place of Business 4960 5W 52 M 57		3. Mailing Address 4960 SW 52 Ad ST Suite, Apt. #, etc.		<u>-</u>]			
Suite, Apt. #, etc. SUITE 418		SUITE 418			01052005	Chg-P	CR2E034 (10/03)	
FORT LAUDENDALE FL		FORT LANDERDAKE		=/_	4. FEI Numbe 65-098		 	plied For t Applicable
333	Country	33314	Country		5. Certificate	of Status Desired	□ \$8.75 Add Fee Require	
B. Name and Address of Current Registered Agent			Nome		7. Name and	Address of New R	legistered Agent	
PELIOTES 900 RIVER FT. LAUDI	Street Ad	Idress (I	OE A TURNER (P.O. Box Number is Not Acceptable) 613 KEY LARGO LANE					
	City		LAUDE	ERDALE	FL Zip Cod	33(Z		
8. 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. Fam familiar with, and at the obligations of registered agent. SIGNATURE Signature. Appear or printed name of posstand agent and late if applicable. (NOTE: Registered Agent supredure required when renstating) DME								
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution.					00 May Be ed to Fees			
10.	OFFICERS AND E		11.		ADDITIONS/	CHANGES TO OFF	ICERS AND DIRECTORS	S IN 11
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PELIOTES, STEVEN G 900 RIVER REACH DR., #120 FT. LAUDERDALE, FL 33315	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TOE A TURNER 2613 KEY LARGO K FT LAUDERDALE		TITLE NAME STREET ADDRESS CITY-SI-ZIP				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GARY MCHAPA	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	440.	-		☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	F WFW [N 2007]	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP				Change	☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

THE AND TYPED OR PRINTED HAME OF BURNING OFFICER OF DURECTOR

4/15/2005

954.581-2505