


**2005 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 22, 2005 08:00 AM**  
**Secretary of State**

**DOCUMENT # P00000064883**

1. Entity Name  
**PBG ENTERPRISES, INC.**



Principal Place of Business      Mailing Address

**3562 NW 50TH ST**      **3562 NW 50TH ST**  
**MIAMI, FL 33142**      **MIAMI, FL 33142**

**DO NOT WRITE IN THIS SPACE**



04072005    No Chg-P    CR2E034 (10/03)

4. FEI Number      Applied For  
**65-1046041**      Not Applicable

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

6. Name and Address of Current Registered Agent

**PARETAS, GILBERTO**  
**6821 SW 32ND TERRACE**  
**MIAMI, FL 33155**

**DO NOT WRITE IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE Registered Agent signature required when reinstating)      DATE \_\_\_\_\_

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	VP
NAME	PARETA, GILBERTO
STREET ADDRESS	4095 SW 97TH AVE
CITY - ST - ZIP	MIAMI, FL 33165
TITLE	P
NAME	BOVI, OTNIEL
STREET ADDRESS	3562 NW 50TH ST
CITY - ST - ZIP	MIAMI, FL 33142
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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 04/22/05-80032-001 150.00

**DO NOT WRITE IN THIS SPACE**

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: \_\_\_\_\_      Date: **4/8/05**      Daytime Phone #: **305-638-5519**

*Gilberto Paretas*