

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

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # **P95000035491 (6)**

1. Corporation Name
PGM, INC.

APPROVED
AND
FILED

98 FEB 17 PM 4: 05

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



Principal Place of Business:

**3250 MARY STREET
SUITE 301
COCONUT GROVE FL 33133
US**

Mailing Address:

**3250 MARY STREET
SUITE 301
COCONUT GROVE FL 33133
US**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/05/1995

4. FEI Number

65-0579859

Applied For
Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution



\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30



Yes ☐ No

10. Name and Address of New Registered Agent

2. Principal Place of Business:

2a. Mailing Address:

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

**ALAN GOLDBERG
3250 MARY ST.
SUITE 301
COCONUT GROVE FL 33133**

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 607.0541 and 607.1506, 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. This 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 provisions of Sections 607.0505, Florida Statutes.

SIGNATURE

Signature of Agent for Service of Process (Required when changing office)

(If the Registered Agent signature is required when translating)

DATE

12. OFFICERS AND DIRECTORS

12.1 TITLE **P**
12.2 NAME **PLAVE, LAWRENE S**
12.3 STREET ADDRESS **3250 MARY STREET, SUITE 301**
12.4 CITY-ST-ZIP **COCONUT GROVE FL**

☐ DELETE

12.5 TITLE **V**
12.6 NAME **GOLDBERG, ALAN L**
12.7 STREET ADDRESS **3250 MARY STREET, SUITE 301**
12.8 CITY-ST-ZIP **COCONUT GROVE FL**

☐ DELETE

12.9 TITLE **V**
12.10 NAME **MANTEN, JEFFREY M**
12.11 STREET ADDRESS **3250 MARY STREET, SUITE 301**
12.12 CITY-ST-ZIP **COCONUT GROVE FL**

☐ DELETE

12.13 TITLE
12.14 NAME
12.15 STREET ADDRESS
12.16 CITY-ST-ZIP

☐ DELETE

12.17 TITLE
12.18 NAME
12.19 STREET ADDRESS
12.20 CITY-ST-ZIP

☐ DELETE

12.21 TITLE
12.22 NAME
12.23 STREET ADDRESS
12.24 CITY-ST-ZIP

☐ DELETE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), Florida Statutes. I further certify that the information included 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 this corporation or the registered agent, authorized to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13, if changed, on an attachment to this filing.

SIGNATURE:

[Handwritten Signature]

1/6/98 305-444-6658

CR2E034 (10/97)