

May 30 04 12:53p

Spring Forest Office Park

**2004 FOR PROFIT CORPORATION
ANNUAL REPORT****FILED**
Jun 15, 2004 8:00 am
Secretary of State

06-15-2004 90003 012 ***550.00

DOCUMENT # P980000614071. Entity Name
PRENEZ EN GRE, INC.

Principal Place of Business

~~10960 SR 70 EAST~~
~~SPRING FOREST OFFICE PARK~~
~~BRADENTON, FL 34202~~2840 Manatee Ave E
Bradenton FL
34208

Mailing Address

~~10960 SR 70 EAST~~
~~SPRING FOREST OFFICE PARK~~
~~BRADENTON, FL 34202~~2840 Manatee Ave E
Bradenton FL 34208

54057504

**DO NOT WRITE IN THIS SPACE**

03242003 No Chg-P CR2E034 (10/03)

4. FEI Number
65-0844648Applied For
Not Applicable5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

OGLES, MARK R
~~10960 SR 70 EAST~~
~~SPRING FOREST OFFICE PARK~~
~~BRADENTON, FL 34202~~2840 Manatee Ave E
Bradenton FL
34208**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

Signature, typed or printed name of registered agent and role if applicable.

(NOTE: Registered Agent signature required when re-appointing)

DATE

FILE NOW!!! FEE IS \$550.00
Due by September 8, 20049. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees**10. OFFICERS AND DIRECTORS**TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPPD
OGLES, MARK R
~~10960 SR 70 EAST~~
~~BRADENTON, FL 34202~~2840 Manatee Ave E
Bradenton FL 34208TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPVSTD
MCGREGOR, JOHN B
~~10960 SR 70 EAST~~
~~BRADENTON, FL 34202~~626 137th St NE
Bradenton FL 34205TITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIPTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP**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 authority like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #