

2001 UNIFORM BUSINESS REPORT (UBR)

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90140 042 ***150.00

DOCUMENT # P99000014326

1. Entity Name
PBG CONSTRUCTION, INC.

Principal Place of Business 1520 FLETCHER STREET HOLLYWOOD FL 33020	Mailing Address 1520 FLETCHER STREET HOLLYWOOD FL 33020
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B0056109



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3314 Ed Dodd Trail Gainesville, GA 30506	3. Mailing Address c/o PTC World Wide 1367 S UNIVERSITY PLANTATION FL
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4. FEI Number 65-0906634	Applied For Not Applicable
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Zip 30506	Country	Zip 33324	Country
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~PTC: WORLD-WIDE, INC.~~
4801 UNIVERSITY DR., STE. 119-B
DAVIE FL 33328

Name		
Street Address (P.O. Box Number is Not Acceptable)	1367 S UNIVERSITY DR	
City	PLANTATION	FL
Zip Code	33324	

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.

SIGNATURE Maail Lurani
 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	D	<input type="checkbox"/> Delete
NAME	GUPTILL, PETER B	
STREET ADDRESS	1520 FLETCHER STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE	D	<input type="checkbox"/> Delete
NAME	GUPTILL, LAURA A	
STREET ADDRESS	1520 FLETCHER STREET	
CITY-ST-ZIP	HOLLYWOOD FL 33020	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUPTILL, PETER B	
STREET ADDRESS	3314 ED DODD TRAIL	
CITY-ST-ZIP	Gainesville GA 30506	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GUPTILL, LAURA A	
STREET ADDRESS	3314 ED DODD TRAIL	
CITY-ST-ZIP	Gainesville GA 30506	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Laura Guptill Laura Guptill 4/29/01 7702979739
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (10/00)