

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 05, 2008 8:00 am
Secretary of State

03-05-2008 90032 050 ***150.00

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1. Entity Name

CARGO PROPERTIES GROUP, INC.



Principal Place of Business

**450 N PARK RD
#800
HOLLYWOOD, FL 33021 US**

Mailing Address

**450 N PARK RD
#800
HOLLYWOOD, FL 33021 US**

DO NOT WRITE IN THIS SPACE



02252008 No Chg-P CR2E034 (11/05)

4. FEI Number

65-0690288

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**GOUHAN, LEO J
4102 BUCHANAN STREET
HOLLYWOOD, FL 33021**

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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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE PD
NAME CARNER, STEPHEN
STREET ADDRESS 1 GROVE ISLE DRIVE APT. 1809
CITY-ST-ZIP COCONUT, FL 33133

TITLE ST
NAME GOUGHAN, LEO
STREET ADDRESS 450 N PARK ROAD, STE 800
CITY-ST-ZIP HOLLYWOOD, FL 33021

TITLE STVP
NAME GOUGHAN LEO
STREET ADDRESS 450 N PARK ROAD, STE 403 800
CITY-ST-ZIP HOLLYWOOD, FL 33021

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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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

Leo Goughan Vice President
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-27-08
Date

954-983-6667
Daytime Phone #