

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 276702

Entity Name: MISTER G INC

FILED  
Jan 25, 2009  
Secretary of State

## Current Principal Place of Business:

PO BOX 848175  
PEMBROKE PINES, FL 33084 US

## New Principal Place of Business:

1760 NW 82ND TERR.  
PEMBROKE PINES, FL 33024 US

## Current Mailing Address:

P.O. BOX 848175  
PEMBROKE PINES, FL 330840175 US

## New Mailing Address:

FEI Number: 59-1037057      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GRABER, FRED  
1760 NW 82ND TERR.  
PEMBROKE PINES, FL 33024 US

## Name and Address of New Registered Agent:

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VD ( ) Delete  
Name: GRABER, JUNE,  
Address: 1760 NW 82ND TERR  
City-St-Zip: PEMBROKE PINES, FL

Title: PD ( ) Delete  
Name: GRABER, FREDRIC,  
Address: 1760 NW 82ND TERR  
City-St-Zip: PEMBROKE PINES, FL

Title: SD ( ) Delete  
Name: GRABER, LOVELLA,  
Address: 501 E DANIA BEACH BLVD.  
City-St-Zip: DANIA, FL

Title: VD ( ) Delete  
Name: BEALE, CHERYL,  
Address: 11903 SW 13TH CT  
City-St-Zip: DAVIE, FL

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FRED GRABER

PD

01/25/2009

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date