2004 FOR PROFIT CORPORATION **ANNUAL REPORT**

Jul 15, 2004 8:00 am Secretary of State **DOCUMENT #694683** 07-15-2004 90002 034 ***150.00 C.G. INTERNATIONAL, INC. Principal Place of Business Mailing Address . ~ ~ ~ ~ ~ ~ (3800 S OCEAN DR #311 3800 S OCEAN DR #311 HOLLYWOOD, FL 33019 HOLLYWOOD, FL 33019 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07082004 Chg-P CR2E034 (10/03) City & State City & State 4. FEI Number Applied For 59-2108229 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARFIELD, CHARLOTTE H. _Street.Address_(P.O. Box Number is Not Acceptable) ___ 3800 S OCEAN DR HOLLYWOOD, FL 33019 Zip Code 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable. 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the Trust Fund Contribution. corporation did not receive the prior notice. Added to Fees Due by September 8, 2004 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. ☐ Change ☐ Addition ☐ Delete TITLE TITLE GARFIELD, CHARLOTTE H. NAME NAME STREET ADDRESS 3800 S OCEAN DR #311 STREET ADDRESS CITY-ST-ZIP HOLLYWOOD, FL 0, CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE GARFIELD, ALAN J NAME NAME 2378 BEACON HILL DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP DUBUQUE, IA 52003 CITY-ST-ZIP ☐ Change ☐ Delete TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7P CITY-ST-ZIP ☐ Change ☐ Addition - Delete ا TITLE, 👡 🚅 TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ■ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 all other like empowered.

RINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Mitchell J. Howard

54062367

CERTIFIED PUBLIC ACCOUNTANT

July 2, 2004

Department of State Division of Corporations P.O. Box 6198 Tallahassee, FL 32314

Re: CG International Inc.

Period/Form: 2004 Annual Report

FEIN: 59-2108229

Dear Sir or Madam:

I write on behalf of the above referenced taxpayer, specifically to address the enclosed late filing of the 2004 Annual Business Report.

The taxpayer did not receive the form via US Mail. However, the address of record is correct. I respectfully request that you consider waiving the penalty that normally follows in this situation, as the penalty is a financial hardship for this For Profit organization. Enclosed is the 2004 payment of \$150.

Your consideration toward this matter is greatly appreciated. Please issue a closing letter directly to the taxpayer upon your determination.

Very truly yours,

Mitchell J Howard

Enclosures

Altachner



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FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

July 8, 2004

C.G. INTERNATIONAL, INC. 3800 S OCEAN DR #311 HOLLYWOOD, FL 33019

SUBJECT: C.G. INTERNATIONAL, INC. Ref. Number: 694683

We have received your check(s) totaling \$150.00; however it cannot be processed and is being returned for the following:

There was not a completed annual report/uniform business report form submitted with your check. The enclosed form must be completed in its entirety and resubmitted with the filing fee.

TO AVOID THE \$400.00 LATE FEE, PLEASE RETURN THE CORRECTED REPORT TO: DIVISION OF CORPORATIONS, P.O. BOX 1500, TALLAHASSEE, FLORIDA 32302-1500 WITHIN 30 DAYS OF THE DATE OF THIS LETTER.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Katrina Sutphin

Letter Number: 504A00043795