

**FOR PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Aug 27, 2007 8:00 am
Secretary of State

07-30-2007 90066 001 ***150.00

DOCUMENT # **F02006000912**
1. Entity Name **PM BROGAN INC**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
718 WING FOOT LANE
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

City & State
MELBOURNE
Zip **32940** Country **BEVAED**

City & State
FLORIDA
Zip Country

66021432

CR2E034B (8/05)

4. FEI Number
11-3464076

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent
Name **ANTHONY GIANNATTASIO**
Street Address (P.O. Box Number is Not Acceptable) **718 WING FT LANE**
City **MELBOURNE** FL Zip Code **32940**

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 DATE

(NOTE: Registered Agent signature required when reappointing)

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended AR is \$61.25

Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS

TITLE **PRESIDENT**
NAME **PATRICIA GIANNATTASIO**
STREET ADDRESS **718 WING FOOT LANE**
CITY-ST-ZIP **MELBOURNE FL 32940**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **VICE PRESIDENT**
NAME **ANTHONY GIANNATTASIO**
STREET ADDRESS **718 WING FOOT LANE**
CITY-ST-ZIP **MELBOURNE FL 32940**

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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 807, Florida Statutes; and that my name appears in Block 10 or on an attachment with an address; with all other like empowered

SIGNATURE: **ANTHONY GIANNATTASIO** **7/24/07** **321-757-9662**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

Brogan Sales

718 Wing Foot Lane
Melbourne FL 32940

Phone: 321-757-9662 Fax: 321-757-0753

Reference # FO2000001912

66021432

Brogan Sales@aol.com

August 22, 2007

To Whom It May Concern:

This year I did not receive notification to pay my corporate fees in January.

I was hoping to have the \$400 late fee waived. If you look back to previous years you will see that our annual report was always filed on time with the appropriate fee enclosed.

Thank you for your time and consideration of this matter.

PATRICIA GIANNATTASIO
Patricia Giannattasio
PRESIDENT
P.M. BROGAN, Inc