FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G14187

(0)

FILED Mar 26 1998 8:00am Secretary of State

A & F	PG ENTERPRISES, INC	•	· •							
Principal Pla	ice of Business	Mailing A	\ddress		_		* E)	11 41811 18 6 1
5721 S.W. 73RD STREET 5721 S.W. 73RD STREET MIAMI FL 33143-5305 MIAMI FL 33143-5305							DO NOT WRITE IN	2 SIHT	PACE	
							3. Date Incorporated or Qualified	11 110 0	TAGE	
							12/17/1982			
2. Principal Place of Businoss 2a. Mailing Address							4. FEI Number		Ap	plied For
21		26					59-2242422		No	t Applicabl
Suite, Ap	1. #, etc.		Suite, Apt. #, etc.				6. Certificate of Status Desired)	\$8.75 A	
City & Sta	ale		ity & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution				
Zip	Country	Zip		Count	try		8. This corporation owes or has paid to		_	
24	25	29	A	30			Personal Property Tax due June 30			No
	9. Name and Address o	T Current Hegistereo	Agent	8	ıı T	Name	10. Name and Address of New Regis	tered A	.gent	
	AYVIS, MYRON J.			Ľ	"	Name				
	821 S.W. 69TH COURT				2 Street Addres		ess (P.O. Box Number is Not Acceptable)			
IV.	MIAMI FL 33156									
				8	1					
				8	4	City		FL	85 Zip (Code
11. Pursuan	nt to the provisions of Sections	607,0502 and 607,150	8 Florida Stati	utes the abo	IVA-	named corpo	oration submits this statement for the purpon's board of directors. I hereby accept the		changing it	s registerer
SIGNATURE Signature typind or printed name of registered agent and title if applicable (NOTE Reg. 12. OFFICERS AND DIRECTORS					gent	t signature require	d when reinstating) ADDITIONS/CHANGES TO OFFICER	DATE IS AND	DIRECTOR	S IN 12
TITLE	PD		DELETE		Ē				Change	Addition
NAME	GONZALEZ, ANA A.			1.2 NAME		Ì				
STREET ADDRESS	7623 S.W. 91ST AVEN	NUE		1.3 STRE	E1 A	DDRESS				
CITY-ST-ZIP	MIAMI FL			1.4 CITY	- ST-	- ZIP				
TITLE	SD		DELETE						Change	Additio
NAME	GONZALEZ, ANA MAF			2 2 NAMI	E					
STREET ADDRESS		IUE		2.3 STRE	ET A	DDRESS				
CITY-ST-ZIP	MIAMI FL		DELETT	2. 4 CITY		- ZIP:			05	3 3 3 6 7 -
TITLE	ONTALEZ PEDRO L	TD DELETE GONZALEZ, PEDRO M.		3.1 TiTLE		9		ι	Change	Addition
NAME expres applican	0070 CH 00 07	٦.		3.2 NAME		000000				
STREET ADDRESS	MIAMI FL			3.3 STRE						
CITY-ST-ZIP	Will will I C		DELETE	3.4. CITY 4.1 TITLE		- ZIP			Change	Addition
NAME				4. 2 NAM				ı		
STREET ADDRESS				4.3 STREE		.DDRESS				
CITY-ST-ZIP				4.4 CITY-		- 1				
TITLE			DELETE	5.1 TITLE					Change	Addition
NAME				5.2 NAME	E				-	
STREET ADDRESS				5.3 STREE		DDRESS				
CITY-ST-ZIP				5.4 City						
TITLE			DELETE	6.1 TITLE					Change	Addition
NAME				6.2 NAME	E					
STREET ADDRESS	.1			6.3 STREI	FT A!	DDRESS				

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

6.4 CITY-ST-ZIP