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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # G14187

1. Corporation Name

A & PG ENTERPRISES, INC.

Principal Place of Business		Mailing Address							
5721 S.W. 73RD	STREET	5721 S.W. 73RD STREET							
MIAMI FL 33143		MIAMI FL 33143-5305			DO NOT WRITE	DO NOT WRITE IN THIS SPACE			
						Date Incorporated or Qualified			
						12/17/1982			
		20 Mailing Address				4. FEI Number		An	plied For
2. Principal Pl	ace of Business	2a. Mailing Address				59-2242422		<u> </u>	t Applicable
21			26			39-2242422	•	\$8.75	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			5. Certifcate of Status Desired	<b>_</b>	Fee Re	
22		27	<del>_</del>						
City & State	9		City & State			6. Election Campaign Financing		\$5.00 Added t	
23		28				Trust Fund Contribution			71 663
Zip	Country	Zip		ountry		8. This corporation owes the current		igible ∃Yes ′	MNo
24	25	29	30	-		Personal Property Tax.  10. Name and Address of New Reg			LEXIVO .
	9. Name and Address of Currer	t Registered Agent		81	Name	10. Name and Address of New Re	istered A	gent	
DAVI	VIS, MYRON J.			°'	ivame				
		82 Street Add			dress (P.O. Box Number is Not Acceptable)				
	S.W. 69TH COURT					<u> </u>		*	
MIAN	AI FL 33156			83					
				84	City			85 Zip (	Code
					-		FL		
office or r	enictored agent or both in the State	of Florida, Such change was :	authoriza	ea by i	ine corbora	rporation submits this statement for the pution's board of directors. I hereby accept to	he appoint	ment as re	gistered
agent. I a	m familiar with, and accept the obliga	igions of, Section 607.0303, Fi	onua St	giuico.		,			
SIGNATURE	Signature, typed or printed name of registered age	nt and title if poplicable (NOT	E: Register	ed Agen	I signature requi	ired when reinstating)	DATE	<del></del> -	
12.		D DIRECTORS	13		-	ADDITIONS/CHANGES TO OFFI	ERS AND	DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1	TITLE				Change	☐ Addition
NAME	GONZALEZ, ANA A.		12	NAME					
	7623 S.W. 91ST AVENUE				ADDRESS				
STREET ADDRESS				-	l l			*:	
CITY-ST-ZIP	MIAMI FL		_	CITY-ST	-217			Change	Addition
TITLE	SD AND MARIA								_
NAME	GONZALEZ, ANA MARIA			NAME					
STREET ADDRESS	7623 S.W. 91ST AVENUE		2.3	STREET	ADDRESS				
CITY-ST-ZIP	MIAMI FL			CITY-S	T- ZIP	<u> </u>		~ h	- Additon
TITLE	TD	☐ DELETE	3.1	TITLE	1	2573 Jurkin ( Weston, F.P. 33	<b>†</b>	Change	Addition
NAME	Gonzalez, Pedro M.		3.2	NAME		Je s g g st. Dett (	7		
STREET ADDRESS	8870 SW 85 ST.		(3.3	STREET	ADDRESS	Weston, Fl. 33:	327		
CITY-ST-ZIP	MIAMI FL		3.4	CITY-S	r-zip				
TITLE \		☐ DELETE	4.1	TITLE				Change	☐ Addition
NAME			4.3	NAME				700	
STREET ADDRESS			4.3	STREET	ADDRESS	·		*	
CITY-ST-ZIP				CITY-ST					
TITLE		DELETE	_	TITLE		<del></del>		Change	Addition
NAME		_		NAME				* *	
					ADDRESS		•	•	
STREET ADDRESS			•	CITY-ST	- 1				
CITY-ST-ZIP		DELETE	_	TITLE		<u> </u>		Change	Addition
TITLE		C DETELE		NAME					
NAME					ADDDESS				
STREET ADDRESS					ADDRESS				
CITY OT 710			6.4	CITY-ST	r-ZIP				

14. 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 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, with all other like empowered.

Mar 06, 1999 8:00 am Secretary of State

03-06-1999 90088 029 \*\*\*150.00