




**FILED**  
**Aug 21, 2008 8:00 am**  
**Secretary of State**

08-21-2008 90001 037 \*\*\*150 00

<b>DOCUMENT # G20268</b>				<b>Secretary of State</b>	
1. Entity Name <b>K.G.R. CORP.</b>				08-21-2008 90001 037 ***150.00	
Principal Place of Business <b>28 S.E. 4TH ST BOCA RATON, FL 33432 US</b>		Mailing Address <b>28 S.E. 4TH ST BOCA RATON, FL 33432 US</b>			
2. Principal Place of Business - No P.O. Box # <b>450 NE 20th Street</b>		3. Mailing Address <b>450 NE 20th Street</b>		08132008 Chg-P CR2E034 (12/06)	
Suite, Apt. #, etc. <b>Suite 111</b>		Suite, Apt. #, etc. <b>Suite 111</b>		4. FEI Number <b>59-2255713</b>	
City & State <b>Boca Raton, Florida</b>		City & State <b>Boca Raton, Florida</b>		Applied For Not Applicable	
Zip <b>33431</b>	Country <b>U.S.A.</b>	Zip <b>33431</b>	Country <b>U.S.A.</b>	5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>KAPLAN, PETER M. 7031 ISLEGROVE PL BOCA RATON, FL 33433</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____					
<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP KAPLAN, PETER M. 7031 ISLEGROVE PLACE BOCA RATON, FL 33433	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 life empowered.					
SIGNATURE: 		Peter M. Kaplan, President 8/20/08 561-362-4242			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #			



ATTACHMENT  
40113986

August 20, 2008

Division of Corporations  
Annual Report  
P.O. Box 6478  
Tallahassee, FL 32314

Re: 2008 for Profit Corporation Annual Report  
K.G.R. CORP - Document #G20268

Gentlemen:

I have never received any notice requesting payment for the above subject company annual fee. The first written notification of this matter that I received came in the form of a postcard entitled "Notice of Intent to Dissolve."

Therefore I am enclosing a check in the amount of \$150.00 along with a signed copy of the Annual Report.

Very truly yours,

K.G.R. CORP

A handwritten signature in black ink, appearing to read "Peter M. Kaplan", is written over a horizontal line. The signature is fluid and cursive.

Peter M. Kaplan, President

Encs/via FedEx

**PMK INTERNATIONAL LTD., INC.**

Licensed Real Estate Broker & Investments

450 NE 20th Street

Suite 111

Boca Raton, FL 33431

(561) 362-4242