

FILE NOW: Fee after May 1, will be \$538.75

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97 MAY -5 PM 1:44

SECRETARY OF STATE
TALLAHASSEE FLORIDA

LIMITED LIABILITY COMPANY ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortman Secretary of State DIVISION OF CORPORATIONS
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FILING FEE \$ 203.75	Annual Report \$100.00 + \$103.75 Corporation Supplemental Fee Make Check Payable To: FLORIDA DEPARTMENT OF STATE
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1. Name and Mailing Address of Limited Liability Company	DOCUMENT #L96000001151
P & G MANAGEMENT GROUP LLC 17105 GULF BLVD SUITE 106 N REDINGTON BEACH FL 33706-1402	

1a. Principal Place of Business Address
17117 17105 GULF BLVD SUITE 106 147 N REDINGTON BEACH FL 33706

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a.

2. Principal Place of Business	2a. Mailing Address
17117 GULF BLVD Suite, Apt. #, etc. 147 City & State NORTH REDINGTON BEACH FL Zip 33708 Country	City & State Zip Country

3. Date Organized or Qualified	3a. State of Formation
10/30/1996	FL
4. FEI Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
65-0708300	
5. Date of Last Report	6. Certificate of Status Desired
	<input type="checkbox"/> SB F (Additional Fee Required)

7. Name and Address of Current Registered Agent
ECKS, GEORGE E E 17105 GULF BLVD SUITE 106 N REDINGTON BEACH FL 33706

8. Name and Address of New Registered Agent
Name ECKS GEORGE E Street Address (P.O. Box Number is Not Acceptable) 17117 GULF BLVD Suite, Apt. #, etc. 147 City NORTH REDINGTON BEACH FL Zip Code 33708

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE  DATE 5-3-97
(Registered Agent Accepting Appointment) (NOTE: Registered Agent signature required when reinstating)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	ECKS, GEORGE E	17117 17105 GULF BLVD, APT 106 147	N REDINGTON BEACH FL
MGRM	HIGGINS, PATRICIA C	17105 GULF BLVD, APT 106 147	N REDINGTON BEACH FL

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11. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3) (f), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes; and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:  4-15-97 813-663-8463
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER OR MANAGER Date Daytime Phone #