


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2006 08:00 AM
Secretary of State

DOCUMENT # M16740 1. Entity Name INTERNATIONAL B & G CORPORATION	
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Principal Place of Business
1080 W 29TH STREET
HIALEAH, FL 33012

Mailing Address
1080 W 29TH STREET
HIALEAH, FL 33012



04302006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2548628

Applied For
Not Applicable

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

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

RAMIREZ, BRAULIO G.
1080 W 29TH ST
HIALEAH, FL 33012

**DO NOT WRITE
IN THIS SPACE**

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 _____

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE _____

**FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	DP
NAME	RAMIREZ, BRAULIO G.
STREET ADDRESS	1080 W 29TH ST
CITY- ST- ZIP	HIALEAH, FL 33012
TITLE	S
NAME	BICHARA, GEORGE
STREET ADDRESS	1080 W. 29TH ST.
CITY- ST- ZIP	HIALEAH, FL 33012
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

000000560740
05/18/06-80052-013 150.00

**DO NOT WRITE
IN THIS SPACE**

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 like empowered.

SIGNATURE: _____

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-1/1200C 305-8886830
Date _____ Daytime Phone # _____