2006 FOR PROFIT CORPORATION ANNUAL REPORT

Jul 17, 2006 8:00 am Secrétary of State DOCUMENT # M84710 1. Entity Name 01-25-2006 90022 010 ***150.00 P G CONSTRUCTION, INC. Principal Place of Business Mailing Address 186 ORCHID STREET **186 ORCHID STREET** 66021905 TAVERNIER, FL 33070 TAVERNIER, FL 33070 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. 07122006 CR2E034 (11/05) Chg-P City & State City & State 4. FEI Number Applied For 65-0051307 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent **GUNTHNER, PHILIP T** Street Address (P.O. Box Number is Not Acceptable) MILE MARKER 91.7, OCEANSIDE 186 ORCHID STREET TAVERNIER, FL 33070 Zip Code City 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 \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Due by September 6, 2006 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITEF ☐ Delete TITLE ☐ Change ☐ Addition NAME **GUNTHNER, PHILLIP** NAME STREET ADDRESS 186 ORCHID STREET STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TAVERNIER, FL 33070 TITLE Delete TITLE ☐ Change ☐ Addition BROWN, JEFFREY NAME NAME 158 HARBOR DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP TAVERNIER, FL 33070 CITY-ST-7IP Addition Change TITLE TITLE RICHARD MARTIN REVES LICHARDE DA 1406 EAST MORWY DR APT. # 203 QUENTON, JAMES NAME NAME STREET ADDRESS 215 WEST INDIES ROAD STREET ADDRESS HOMESTEAD FL 33033 CITY-ST-ZIP CITY-ST-ZIP TAVERNIER, FL 33070 TITLE Addition TITLE ☐ Delete ☐ Change NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP ☐ Delete TITLE TITI F ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete Change ■ Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZiP CITY-ST-ZIP

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 converse or true tree 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 a pagicless, with all other like empowered.

SIGNATURE:

FILED

ATTACHMENT

6602 1905

Anne Harris, C.P.A., P.A. P.O. BOX 1639 ISLAMORADA, FL 33036 305 852-2257

July 12, 2006

Florida Dept of State Division on Corps P.O. Box 6327 Tallahassee, FL 32314

RE: PG Construction, Inc.

Doc # M84710

To Whom It May Concern:

The above referenced corporation filed a annual report and paid the \$150 on January 17, 2006. Attached is a copy of the annual report as well as a copy of the canceled check.

Please update your records to reflect this timely filing.

Thank you,

Anne Harris, C.P.A.

ATTACHMENT

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