

2007 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P00000007530

Entity Name: T D G ENTERPRISES, INC.

FILED
Feb 13, 2007
Secretary of State

Current Principal Place of Business:

266 JOE CAMPBELL RD
FREEPORT, FL 32439

New Principal Place of Business:

Current Mailing Address:

266 JOE CAMPBELL RD
FREEPORT, FL 32439

New Mailing Address:

FEI Number: 65-1125942

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GUARDIA, TOMAS G
266 JOE CAMPBELL RD
FREEPORT, FL 32439 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: GUARDIA, TOMAS G
Address: 266 JOE CAMPBELL RD
City-St-Zip: FREEPORT, FL 32439

Title: VP () Delete
Name: CRUZ, ISMAEL
Address: 2018 HWY 393 N
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: O () Delete
Name: PINA, EDINSON F
Address: 200 W ANNE
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: VP () Delete
Name: GUARDIA, MARIBEL
Address: 266 JOE CAMPBELL RD
City-St-Zip: FREEPORT, FL 32439

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: O (X) Change () Addition
Name: PONCE, ANTONIO
Address: 167 N 4TH STREET
City-St-Zip: SANTA ROSA BEACH, FL 32459

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMAS G GUARDIA

P

02/13/2007

Electronic Signature of Signing Officer or Director

Date