2007 FOR PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

DOCUMENT # P00000042442

1. Entity Name

T & G PROPERTIES OF SOUTH FLORIDA, INC.



Principal Place of Business

Mailing Address

1300 RIVERLAND RD. FT. LAUDERDALE, FL 33312 1300 RIVERLAND RD. FT. LAUDERDALE, FL 33312



01232007

No Chg-P

CR2E034 (11/05)

FILED

Feb 12, 2007 08:00 AM

Secretary of State

4. FEI Number 65-1090853 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

ANDREWS, JOHN S ESQ 1300 RIVERLAND RD. FT. LAUDERDALE, FL 33312

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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 /				required when rainstating)	DATE
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	000000632740 02/21/07-80032-024 158.75
10.	OFFICERS AND DIREC	CTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP RHOADES, TERRY 1300 RIVERLAND ROAD FORT LAUDERDALE, FL 33312				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDVT STARKWEATHER, GARY 1300 RIVERLAND ROAD FORT LAUDERDALE, FL 33312				
TITLE NAME STREET ADDRESS CITY+ST-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP				IN .	THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS					

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 a other like empoyered.

SIGNATURE: _

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

1 31 200-

(954)581-9929

Daytime Phone #