

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 12, 2002 8:00 am
Secretary of State
 05-12-2002 90642 023 ***150.00

DOCUMENT # P00000093497

1. Entity Name

PG ACCOUNTING & GENERAL SERVICES CORP.

Principal Place of Business

3721 W HILLSBORO BLVD

D-205

COCONUT CREEK FL 33073-2075

Mailing Address

3721 W HILLSBORO BLVD

D-205

COCONUT, CREEK FL 33073-2075

2. Principal Place of Business

105 Lock Rd.

3. Mailing Address

105 Lock Rd.

Suite, Apt. #, etc.

5

Suite, Apt. #, etc.

5

City & State

DEERFIELD BCH - FL.

City & State

DEERFIELD BCH - FL.

Zip

33442

Country

Zip

33442

Country

4. FEI Number

65-1050202

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

BRAVO, ADA F
3600 S STATE RD 7, SUITE 229
MIRAMAR FL

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May/Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **PSTD** ☐ Delete
 NAME **GOMEZ, PEDRO P**
 STREET ADDRESS **3721 W HILLSBORO BLVD #D-205**
 CITY-ST-ZIP **COCONUT CREEK FL 33073-2075**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
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TITLE ☐ Delete
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TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PSTD** ☒ Change ☐ Addition
 NAME **GOMEZ, PEDRO P**
 STREET ADDRESS **105 Lock Rd #5**
 CITY-ST-ZIP **DEERFIELD BCH - FL 33442**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
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 CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
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TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE OF PEDRO P. GOMEZ **04/19/02 (954) 571-9329**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (9/01)