

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P01000108190

1. Entity Name  
C.M.T.G., INC.



Principal Place of Business  
7759 S.W. 184TH WAY  
MIAMI, FL 33157

Mailing Address  
7759 S.W. 184TH WAY  
MIAMI, FL 33157

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



02282008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1151232

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

CORPORATE CREATIONS NETWORK INC.  
941 FOURTH STREET #200  
MIAMI BEACH, FL 33139

**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<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | PD<br>GULLEY, CLINTON<br>7759 S.W. 184TH WAY<br>MIAMI, FL 33157 |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP | S<br>GULLEY, MARGARET T<br>7759 SW 184 WAY<br>MIAMI, FL 33157   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP |   |

**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:

*Clinton Gulley*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/30/06

Date

1305254332

Daytime Phone #