

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90204 031 ***158.75

DOCUMENT # P02000004964

1. Entity Name
D.M.P.G., INC.



Principal Place of Business
7644 NORTHWEST 3RD STREET
MIAMI, FL 33126

Mailing Address
7644 NORTHWEST 3RD STREET
MIAMI, FL 33126

34044320



2. Principal Place of Business

→ 5740 Winkler Rd.

3. Mailing Address

5740 Winkler Rd.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

02282004

Chg-P

CR2E034 (10/03)

City & State
Fort Myers

City & State
Fort Myers

4. FEI Number
APPLIED FOR 75-2993380

Applied For
Not Applicable

Zip
33919

Country
USA

Zip
33919

Country
USA

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

6. Name and Address of Current Registered Agent

PERERA GONZALEZ, DOMINGO M
7644 NORTHWEST 3RD STREET
MIAMI, FL 33126

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. 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

4-12-04

FILE NOW!!! FEE IS \$150.00
After May 1, 2004 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D
NAME PERERA GONZALEZ, DOMINGO M ☐ Delete
STREET ADDRESS 7644 NORTHWEST 3RD STREET
CITY-ST-ZIP MIAMI, FL 33126

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE DP ☐ Change ☒ Addition
NAME Perera Gonzalez Domingo
STREET ADDRESS 5740 Winkler Rd.
CITY-ST-ZIP Fort Myers FL 33919

TITLE V.P. ☐ Change ☒ Addition
NAME osmayda perera
STREET ADDRESS 5740 Winkler Rd
CITY-ST-ZIP Fort Myers, FL 33919

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

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

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

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

12. 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 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/04 305-553-4333