

2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 03, 2004 08:00 AM
Secretary of State

DOCUMENT # P02000133758

1. Entity Name
B & G CONSTRUCTION GROUP, INC.



Principal Place of Business
**151 S HIGHWAY 17/92
LONGWOOD, FL 32750-5585**

Mailing Address
**151 S HIGHWAY 17/92
LONGWOOD, FL 32750-5585**



01222004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3697750

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

Applied For
Not Applicable

6. Name and Address of Current Registered Agent

**GRATEROL, ALEJANDRO
151 S HIGHWAY 17/92
LONGWOOD, FL 32750-5585**

**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]

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

(NOTE: Registered Agent signature required when resigning)

02-02-04

DATE

**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**

**U00000032850
02/05/04-80020-002 150.00**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GRATEROL, ALEJANDRO
STREET ADDRESS	151 S HIGHWAY 17/92
CITY-ST-ZIP	LONGWOOD, FL 327505585
TITLE	VP
NAME	BERTOLINI, ENRICO
STREET ADDRESS	AVENIDA PANTIN 3-27 PB CHACAO
CITY-ST-ZIP	CARACAS, VENEZUELA
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
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 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]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-30-04

DATE

407-4026775

DAYTIME PHONE #