

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 18, 2006 8:00 am
Secretary of State

04-18-2006 90083 048 ***150.00

DOCUMENT # P03000058334

1. Entity Name

SOUTHERN SALES GROUP, INC.



Principal Place of Business

**8525 43RD AVENUE DRIVE WEST
BRADENTON FL 34209**

Mailing Address

**8525 43RD AVENUE DRIVE WEST
BRADENTON FL 34209**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

1st MOORE

CR2E034 (10/05)

Zip

Country

Zip

Country

4. FEI Number

51-0470840

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**PUSATERI, KELLEY A
8525 43RD DR. W
BRADENTON FL 34209**

7. Name and Address of New Registered Agent

Name **PUSATERI, KELLEY A**

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

8525 43RD AVE. DR. W

**ADDRESS
CORRECTION
ONLY**

City **BRADENTON**

FL **34209**

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

Keiley A. Pusateri

KEILEY A. PUSATERI

4/8/06

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

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE **DVT** ☐ Delete
NAME **PUSATERI, SAMUEL J**
STREET ADDRESS **8525 43RD AVENUE DRIVE WEST**
CITY-ST-ZIP **BRADENTON FL 34209**

TITLE **DPS** ☐ Delete
NAME **PUSATERI, KELLEY A**
STREET ADDRESS **8525 43RD AVE DR. W.**
CITY-ST-ZIP **BRADENTON FL 34209**

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

TITLE ☒ Change ☐ Addition
NAME **DPS**
STREET ADDRESS **KEILEY A. PUSATERI**
CITY-ST-ZIP **8525 43RD AVE. DR. W.
BRADENTON, FL. 34209**

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 exemptions contained in Section 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

Samuel J. Pusateri

SAMUEL J. PUSATERI 4/8/06 (941) 730-8856

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #