

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jun 26, 2007 08:00 AM
Secretary of State

DOCUMENT # P04000128621

1. Entity Name
PREMIUM GROUP CONSTRUCTION, INC.



Principal Place of Business
**3705 54TH. DRIVE WEST
UNIT # 101
BRADENTON, FL 34210 US**

Mailing Address
**3705 54TH. DRIVE WEST
UNIT # 101
BRADENTON, FL 34210 US**



06172007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-1618417

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**RAMIREZ, MERCEDES
3705 54TH. DRIVE WEST
UNIT # 101
BRADENTON, FL 34210**

**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)

U000000766597
06/26/07-80002-001 150.00

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 14, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

In accordance with s. 607.193(2)(b), F.S., the
corporation did not receive the prior notice.

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
RAMIREZ, MERCEDES
3705 54TH. DRIVE WEST UNIT # 101
BRADENTON, FL 34210**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
RAMIREZ, LUIS E SR.
3705 54TH. DRIVE WEST UNIT # 101
BRADENTON, FL 34210**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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

SIGNATURE OR PRINTER NAME OF SIGNING OFFICER OR DIRECTOR

06/18/2007

DATE

941 7260313

DAYTIME PHONE #