

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000141186

Entity Name: PGI ENTERPRISES INC.

FILED  
Jul 10, 2009  
Secretary of State

## Current Principal Place of Business:

5090 SW 64TH AVENUE  
# 104B  
DAVIE, FL 33314

## New Principal Place of Business:

## Current Mailing Address:

5090 SW 64TH AVENUE  
# 104B  
DAVIE, FL 33314

## New Mailing Address:

FEI Number: 56-2484050

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

DE LEON, FRANCISCO  
5090 SW 64TH AVENUE  
# 303B  
DAVIE, FL, FL 33314 US

## Name and Address of New Registered Agent:

DE LEON, FRANCISCO  
5090 SW 64TH AVENUE  
# 303B  
DAVIE, FL 33314 US

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.

SIGNATURE:

07/10/2009

Electronic Signature of Registered Agent

Date

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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: DE LEON, PABLO  
Address: 5090 SW 64TH AVENUE # 104B  
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete  
Name: DE LEON, FRANCISCO  
Address: 5090 SW 64TH AVENUE # 303B  
City-St-Zip: DAVIE, FL 33314

Title: VP ( ) Delete  
Name: ESTEVEZ, CARLOS M  
Address: 5090 SW 64TH AVENUE # 303B  
City-St-Zip: DAVIE, FL 33314

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PABLO DELEON

P

07/10/2009

Electronic Signature of Signing Officer or Director

Date