

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000005149

Entity Name: P AND G SONS INC

FILED  
Jul 20, 2006  
Secretary of State

## Current Principal Place of Business:

16048 MAGNOLIA HALL ST  
CLERMONT, FL 34714

## New Principal Place of Business:

2045 ARIANA ST  
LAKELAND, FL 33803

## Current Mailing Address:

35184 US 19 N  
PALM HARBOR, FL 34684

## New Mailing Address:

16048 MAGNOLIA HILL ST  
CLERMONT, FL 34714

FEI Number: 20-2137520

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

MALKI, FADI  
35184 US 19 N  
PALM HARBOR, FL 34684 US

## Name and Address of New Registered Agent:

IBRAHIM, AIDA  
16048 MAGNOLIA HILL ST  
CLERMONT, FL 34714 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: AIDA IBRAHIM

07/20/2006

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: IBRAHIM, AIDA  
Address: 16048 MAGNOLIA HALL ST  
City-St-Zip: CLERMONT, FL 34714

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change ( ) Addition  
Name: IBRAHIM, AIDA  
Address: 16048 MAGNOLIA HILL ST  
City-St-Zip: CLERMONT, FL 34714

Title: VP ( ) Change (X) Addition  
Name: IBRAHIM, GUIRGES  
Address: 16048 MAGNOLIA HILL ST  
City-St-Zip: CLERMONT, FL 37414

I hereby certify that the information supplied with this filing does not qualify for the 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: AIDA IBRAHIM

P

07/20/2006

Electronic Signature of Signing Officer or Director

Date