

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jul 17, 2008 8:00 am
Secretary of State

07-17-2008 90088 001 ***300.00

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1. Entity Name
CPG MARKETING, INC.



Principal Place of Business

4904 EISENHOWER BLVD
STE 250
TAMPA, FL 33634

Mailing Address

4904 EISENHOWER BLVD
STE 250
TAMPA, FL 33634

66015406



07072008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
20-2931409

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

IURATO, KEVIN M
4904 EISENHOWER BLVD
STE 250
TAMPA, FL 33634

**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)

DATE

**FILE NOW!!! FEE IS \$150.00
Due by September 12, 2008**

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 D
NAME GRANGER, DANIEL D
STREET ADDRESS 4904 EISENHOWER BLVD STE 250
CITY-ST-ZIP TAMPA, FL 33634

TITLE D
NAME PORT, JOSEPH P
STREET ADDRESS 4904 EISENHOWER BLVD STE 250
CITY-ST-ZIP TAMPA, FL 33634

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
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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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/14/08