2008 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # P06000043494

1. Entity Name
P R G PROGRAMMING SERVICES INC

Principal Place of Business	Mailing Address
1632 S W 157TH AVENUE PEMBROKE PINES, FL 33027 US	1632 S W 157TH AVENUE PEMBROKE PINES, FL 33027 US

DO NOT WRITE IN THIS SPACE

07132008   No Chg-P   CR2E034 (11/05)

4. FEI Number	Applied For
51-0571746	Not Applicable

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

6. Name and Address of Current Registered Agent

GONZALEZ, PEDRO R MR.
1632 S W 157TH AVENUE
PEMBROKE PINES, FL 33027

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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 $550.00
Due by September 12, 2008

9. Election Campaign Financing Trust Fund Contribution. ☐   **$5.00** May Be Added to Fees

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	GONZALEZ, PEDRO R MR.
STREET ADDRESS	1632 S W 157TH AVENUE
CITY-ST-ZIP	PEMBROKE PINES, FL 33027

U00000355251
07/16/08-80008-016 550.00

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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: _____   7/12/08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #