

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000075937

Entity Name: P M G R ENTERPRISES INC

FILED
Aug 30, 2008
Secretary of State

Current Principal Place of Business:

14901 SW 296 ST
HOMESTEAD, FL 33033

New Principal Place of Business:

Current Mailing Address:

14901 SW 296 ST
HOMESTEAD, FL 33033

New Mailing Address:

FEI Number: 20-4973208

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, JOSEFINA
14901 SW 296 ST
HOMESTEAD, FL 33033 US

Name and Address of New Registered Agent:

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: _____

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: PRE () Delete
Name: RODRIGUEZ, JOSEFINA
Address: 14901 SW 296 ST
City-St-Zip: HOMESTEAD, FL 33033

Title: SECR () Delete
Name: BERMUDEZ, REINALDO
Address: 3355 WEST 68 ST #176
City-St-Zip: HIALEAH, FL 33018

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: JOSEFINA RODRIGUEZ

PRE

08/30/2008

_____ Electronic Signature of Signing Officer or Director

_____ Date