

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000106349

FILED
May 04, 2009
Secretary of State

Entity Name: G & G TUDOR POWER GROUP INC.

Current Principal Place of Business:

131 BEDFORD AVE.
SUITE 131
HALLANDALE, FL 33009 BR

New Principal Place of Business:

131 BEDFORD AVE.
HALLANDALE, FL 33009 BR

Current Mailing Address:

131 BEDFORD AVE.
SUITE 131
HALLANDALE, FL 33009 BR

New Mailing Address:

131 BEDFORD AVE.
HALLANDALE, FL 33009 BR

FEI Number: 20-5686943

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

POBLETE, JOSE OSWALDO
617 S W 5 COURT
HALLANDALE, FL 33009 US

Name and Address of New Registered Agent:

POBLETE, ANGELICA D PILAR
131 BEDFORD AVE
HALLANDALE, FL 33009 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: ANGELICA D PILAR POBLETE

05/04/2009

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: PRE () Delete
Name: GIRALDO, WALTER D JESUS
Address: 131 BEDFORD AVE.
City-St-Zip: HALLANDALE, FL 33009 BR

Title: VICE (X) Delete
Name: POBLETE, ANGELICA D PILAR
Address: 131 BEDFORD AVE.
City-St-Zip: HALLANDALE, FL 33009 BR

Title: MAG (X) Delete
Name: BEDOYA, JESUS EMILIO
Address: 131 BEDFORD AVE.
City-St-Zip: HALLANDALE, FL 33009 BR

Title: SUP (X) Delete
Name: GIRALDO, CESAR WILSON
Address: 131 BEDFORD AVE
City-St-Zip: HALLANDALE, FL 33009 BR

Title: SCRE (X) Delete
Name: MONTALVO, MERCEDES
Address: 131 BEDFORD AVE.
City-St-Zip: HALLANDALE, FL 33009 BR

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRE (X) Change () Addition
Name: POBLETE, ANGELICA D PILAR
Address: 131 BEDFORD AVE.
City-St-Zip: HALLANDALE, FL 33009 BR

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

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: ANGELICA DEL PILAR POBLETE

PRES

05/04/2009

Electronic Signature of Signing Officer or Director

Date