## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000129227

Name: Address:

City-St-Zip:

12497 EQUINE LANE

WELLINGTON, FL 33414 US

Entity Name: B & G GROUP REALTY, INC.

FILED Jul 21, 2008 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 12230 FOREST HILL BOULEVARD 12497 EQUINE LN. WELLINGTON, FL 33414 US SUITE 187 WELLINGTON, FL 33414 **New Mailing Address: Current Mailing Address:** C/O MARIO G. DE MENDOZA, III, P.A. B&G GROUP REALTY, INC. 12765 FOREST HILL BLVD., SUITE 1302 12497 EQUINE LN. WELLINGTON, FL 33414 WELLINGTON, FL 33414 US FEI Number: 20-5676937 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of New Registered Agent: Name and Address of Current Registered Agent: MARIO G. DE MENDOZA, III, P.A MARIA DE BERNAL 12765 FOREST HILL BOULEVARD 12497 EQUINE LN. **SUITE 1302** WELLINGTON, FL 33414 US WELLINGTON, FL 33414 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: MARIA DE BERNAL 07/21/2008 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition DE BERNAL, MARIA C Name: Name: 12497 EQUINE LANE Address: Address: City-St-Zip: WELLINGTON, FL 33414 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition VALENCIA, LUZMARY Name: Name: 15610 MESSINA ISLES COURT Address: Address: DELRAY BEACH, FL 33446 US City-St-Zip: City-St-Zip: Title: Title: S. T () Delete () Change () Addition BERNAL, MARGARITA Name: Name: 12497 EQUINE LANE Address: Address: City-St-Zip: WELLINGTON, FL 33414 US City-St-Zip: Title: ( ) Delete Title: () Change () Addition BERNAL, MARGARITA

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.

Name:

Address:

City-St-Zip:

SIGNATURE: MARIA DE BERNAL PD 07/21/2008