2007 FOR PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:

Jan 24, 2007 08:00 AM DOCUMENT # P93000061259 **Secretary of State** P.G.R. ENTERPRISES, INC. Principal Place of Business Mailing Address 9350 N.W. 58TH STREET 9350 N.W. 58TH STREET MIAMI, FL 33178 US MIAMI, FL 33178 US 01042007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0438756 Not Applicable \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 6. Name and Address of Current Registered Agent SCHWARTZ, TERRENCE S. E DO NOT WRITE 141 N.E. THIRD AVENUE SUITE 601 IN THIS SPACE MIAMI, FL 33132 2. 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 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 П Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS D۷ 3332.F NAME ROMANELLI, PIETRO 9350 N.W. 58TH STREET STREET ADDRESS CITY-ST-ZIP MIAMI, FL 33178 TITLE DPST U00000600437 ROMANELLI, PIETRO 01/28/07-80009-019 150.00 9350 N.W. 58TH STREET STREET ADDRESS CAY-ST-ZIP MIAMI, FL 33178 DV TILLE ROMANELLI, ELENA F NAME **9350 NW 58TH STREET** STREET ADDRESS DO NOT WRITE CITY-ST-ZIP MIAMI, FL 33178 me IN THIS SPACE STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-789 12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes, i further certify that the information indicated on this report or suppliemental 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 tystee employeered 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 without address, with all other like employeered.

NG OFFICER OR DIRECTOR

FILED

Daytime Phone #