

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 3:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000062683 (6)

1. Corporation Name

PMG CENTER, INC.

Principal Place of Business

1430 S. FEDERAL HWY.
#301
DEERFIELD FL 33441

Mailing Address

1430 S. FEDERAL HWY.
#301
DEERFIELD FL 33441

DO NOT WRITE IN THIS SPACE

3. Date incorporated or Qualified

09/02/1993

3a. Date of Last Report

04/29/1994

4. FEI Number

65-0436962

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

8. This corporation has liability for intangible taxes under S. 199.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21 6245 N. Federal Hwy

2a. Mailing Address

26 Same

Suite, Apt. #, etc

Suite, Apt. #, etc

22 5th Floor

27 City & State

23 Ft. Lauderdale FL

28 City & State

24 33308 25 USA

29 Zip

Country

30

9. Name and Address of Current Registered Agent

LEHRER, THOMAS H
ONE E BROWARD BLVD
7TH FL
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name: J. Steven WARNER, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

6245 N. Federal Hwy - 5th Floor
Suite 506

84 City: Ft. Lauderdale

FL

85 Zip Code: 33308

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

[Signature]

4/26/95

12. OFFICERS AND DIRECTORS

12.1 NAME	D
12.2 NAME	GAYDA, PETER M
12.3 STREET ADDRESS	3281 NE 56 CT
12.4 CITY, ST, ZIP	FT LAUDERDALE FL 33308
12.5 TITLE	
12.6 NAME	
12.7 STREET ADDRESS	
12.8 CITY, ST, ZIP	
12.9 TITLE	
12.10 NAME	
12.11 STREET ADDRESS	
12.12 CITY, ST, ZIP	
12.13 TITLE	
12.14 NAME	
12.15 STREET ADDRESS	
12.16 CITY, ST, ZIP	
12.17 TITLE	
12.18 NAME	
12.19 STREET ADDRESS	
12.20 CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 TITLE	☐ Change ☐ Addition
13.2 NAME	
13.3 STREET ADDRESS	
13.4 CITY, ST, ZIP	
13.5 TITLE	☐ Change ☐ Addition
13.6 NAME	
13.7 STREET ADDRESS	
13.8 CITY, ST, ZIP	
13.9 TITLE	☐ Change ☐ Addition
13.10 NAME	
13.11 STREET ADDRESS	
13.12 CITY, ST, ZIP	
13.13 TITLE	☐ Change ☐ Addition
13.14 NAME	
13.15 STREET ADDRESS	
13.16 CITY, ST, ZIP	
13.17 TITLE	☐ Change ☐ Addition
13.18 NAME	
13.19 STREET ADDRESS	
13.20 CITY, ST, ZIP	

14. I, hereby certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Section 199.032, Florida Statutes. I further certify that the information indicated on this annual report of Supplemental annual 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 registered agent of the corporation 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 registered agent of the corporation 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 registered agent of the corporation and that my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

[Signature]

4/26/95