2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

Feb 01, 2007 8:00 am **Secretary of State** DOCUMENT # P93000088580 02-01-2007 90026 002 ***150.00 1. Entity Name PMG HOME SALES, INC. Principal Place of Business Mailing Address 40008042 2500 N FEDERAL HWY 2500 N FEDERAL HIGHWAY SUITE 201 FT.LAUDERDALE, FL 33308 FT.LAUDERDALE, FL 33305 No Chg-P 01222007 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 65-0471978 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent DWV INVESTMENTS, INC DO NOT WRITE 2500 N FEDERAL HIGHWAY **SUITE 201** IN THIS SPACE FT. LAUDERDALE, FL 33304 8. 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) 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE GAYDA, PETER NAME STREET ADDRESS 2500 N FEDERAL HWY SUITE 201 CITY-ST-ZIP FT LAUDERDALE, FL 33308 VP TITLE GAYDA, MARC NAME 2500 N FEDERAL HWY, #201 STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33308 TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this titing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental/report is ture 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 trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if chapter 119, Florida Statutes.

SIGNATURE:

TITLE NAME STREET ADDRESS CITY-ST-ZIP

NAME OF SIGNING OFFICER OR DIRECTOR

FILED

Daytime Phone #