FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P94000014107**1. Corporation Name

P.G. INTERNATIONAL, INC.

•	A Committee of the Comm							
Principal Place	of Business	Mailing Address						
27401 SW 182 AVE. HOMESTEAD FL 33165 US		27401 SW 182 AVE. Homestead FL 33165 US			į	DO NOT WRITE IN T	HIS SPACE	
		•				3. Date Incorporated or Qualifed 02/21/1994		
. 2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For	
21	26				65-0470569	Not Applicable		
Suite, Apt.	#, etc. 19	Suite, Apt. #, etc.	—			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State City & State						6. Election Campaign Financing	\$5.00 May Be	
23		28				Trust Fund Contribution	Added to Fees	
Zip	Country 25	Zip 29				This corporation owes the current year Personal Property Tax.	☐ Yes ☐ No	
,	9. Name and Address of Curren	t Registered Agent	' '			10. Name and Address of New Register	ed Agent	
				81	Name		· :	
GONZALEZ, PAUL 27401 SW 182 AVENUE				82	Street Addres	Idress (P.O. Box Number is Not Acceptable)		
HOMESTEAD FL 33031				83				
				84			85 Zip Code	
					City	F		
agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations.	2 and 607.1508, Florida Statute of Florida. Such change was a tions of, Section 607.0505, Florida and the change was a such as	es, the at uthorized rida Statu	bove-r by th utes.	named corpor e corporation	ration submits this statement for the purpose i's board of directors. I hereby accept the ap	e of changing its registered pointment as registered	
SIGNATURE	Signature, typed or printed name of registered age	nt and title if applicable. (NOTE:	Registered	Agent s	ignature required v	when reinstating) * DATE	· · · · · · · · · · · · · · · · · · ·	
12.		ID DIRECTORS	13.	· · · · · ·		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1,1 TIT	LΕ		6	☐ Change ☐ Addition	
NAME.	GONZALEZ, PAUL		1.2 NA	ME				
STREET ADDRESS	27401 SW 182 AVE.		1.3 ST	REET A	DDRESS			
CITY-ST-ZIP	HOMESTEAD FL 33031		1.4 CiT	TY-ST-Z	ZIP			
TITLE	DELETE 2.11		2.1 TIT	TLE		·	☐ Change ☐ Addition	
NAME	2.21		2.2 NA	ME				
STREET ADDRESS	2.3 \$		2.3 ST	REETA	DDRESS	•	٠,	
CITY-ST-ZIP			2.4 CI		ZIP		1	
TITLE	L 30 12.32	☐ DELETE	3.1 TIT	ΠE			☐ Change ☐ Addition	
NAME	THE STATE OF A STATE OF THE STA		3.2 NA	WE	İ			
STREET ADDRESS CITY-ST-ZIP				REET A	DORESS 7IP			
TITLE		☐ DELETE	4.1 TI			· 1	Change Addition	
NAME	4.		4, 2 N	AME				
STREET ADDRESS		•			DDRESS			
CITY-ST-ZIP				TY-ST-Z			<u></u> <u></u>	
TITLE		☐ DELETE	5.1 TII				Change, Addition	
NAME	**		5.2 NA	ME				
STREET ADDRESS	* 14.		5.3 ST	REETA	DORESS	,	, ,	
CITY-ST-ZIP			5.4 CF	TY-ST-Z	ZIP			

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.1 TITLE 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

NAME

STREET ADDRESS

☐ DELETE

FILED

Jan 23, 1999 8:00am

Secretary of State

01-23-1999 90045 022 ***150.00

305 -246-4646

☐ Change

Addition