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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000090017 (1)

P & G BUILDING, INC.

SIGNATURE:

FILED Feb 25 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address	ing Address			TREE CHANGES	OTIN BOIDI (II	.II (UU) (U)
7880 N UNIVERSITY DR		7880 N UNIVERSITY DR	7880 N UNIVERSITY DR					
SUITE 100		SUITE 100	SUITE 100		DO NOT WOLT	- IN THE 6	DAOE	
TAMARAC FL 33321		TAMARAC FL 33321	TAMARAC FL 33321		DO NOT WRITE IN THIS SPACE			
]					3. Date Incorporated or Qualified 11/27/1995			
├ ──	lace of Business	2a, Mailing Address			4. FEI Number		Ar	oplied For
21		26			65-0625115			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	— · · · · · · · · · · · · · · · · · · ·		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
City & State		City & State	City & State		6. Election Campaign Financing		\$5.00	May Be
23		28	<u> </u>		Trust Fund Contribution	Trust Fund Contribution		to Fees
Zip	hara hara hara		Country	<i>,</i>	8. This corporation owes or has p	ald the cu <u>rr</u>		
24	25 29 30		30		Personal Property Tax due June			_ No
	9, Name and Address of Curr	ent Registered Agent	81		10. Name and Address of New R	egistered A	gent	
	LDSTEIN, IRV		61	Name				
7880 N UNIVERSITY DR SUITE 100			82	Street Add	ress (P.O. Box Number is Not Accepta	ble)		
	MARAC FL 33321		83					,
			84	City	<u> </u>	FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida State	utes, the above	e-named cor	poration submits this statement for the	nurnose of	changing it	s registered
office or r	egistered agent, or both, in the Sta m familiar with, and accept the ob-	ate of Florida. Such change was	authorized by	y the corpora	ation's board of directors. I hereby acce	pt the appo	intment as	registered
1	m laninal with and accept the ob	ilganoria or, occitori oci ilosoo, i	TOTION STATUTE.	ο,				
SIGNATURE	Signature, typed or printed name of registered	agent and title it applicable (NC	TE: Registered Age	ent signature requ	ired when reinstating)	DATÉ		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	IS IN 12
TITLE	P DELETE		1.1 TITLE			****	Change	☐ Addition
NAME GOLDSTEIN, IRVING L			1.2 NAME					
STREET ADDRESS 2641 NE 47 ST			1.3 STREET ADDRESS					•
CITY ST - ZIP	LIGHTHOUSE FL 33064		1.4 CITY-ST-ZIP					
TITLE	ST					1	Change	Addition
NAME	POOLE, KEENAN L		2.2 NAME					
STREET ADDRESS 10123 VESNAL COURT			2.3 STREET ADDRESS					
CITY-ST-ZIP CORAL SPRINGS FL			2.4 CITY-ST-ZIP					
TITLE		☐ DELETE	3.1 TITLE			l	i Change	Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY-ST-ZIP		T or rec	3.4. CiTY - 1	ST-ZIP			70-	1 4 4 100
TITLE		☐ DELETE	4.1 TITLE			l	Change	☐ Addition
NAME			4. 2 NAME					Ì
STREET ADDRESS			4.3 STREET	I				
CITY-ST-ZIP	<u> </u>	DELETE	4.4 CITY - S	T-ZIP			04	Address
TITLE		L_J DELETE	5.1 TITLE	1		ι	Change	☐ Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	·				
CITY-ST-ZIP		DECESS	5.4 CITY - S	T-ZIP			Observed	1 4 2 2 2 2 2 2
TITLE	è	DEL ete	6.1 TITLE			Ĺ	Change	☐ Addition
NAME	0 g - 2		6.2 NAME					
STREET ADDRESS		6.3 STREET						
CITY-ST-78P			64 CITY-S	T. 71P				

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.