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

Mailing Address

7880 N UNIVERSITY DR

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9500090017

P & G BUILDING, INC.

Principal Place of Business 7880 N UNIVERSITY DR

## **FILED** Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90001 012 \*\*\*150.00



SUITE 100 TAMARAC FL 33321		SUITE 100 TAMARAC FL 33321		DO NOT WRITE IN THIS SPACE				
HAMARAC FL 30	3321	IAMARAC FE 33321			3. Date Incorporated or Qualifed			
					11/27/1995			
Principal Place of Business 2a. Mailing Address				·	4. FEI Number	Ap	plied For	
21 26					65-0625115	No	t Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 ₽		
22		27			3. Ceruicate of Status Desired	Fee Re	quired	
City & State		City & State		6. Election Campaign Financing	\$5.00	• 1		
23		28			Trust Fund Contribution	Added t	o Fees	
Zip Country Zip			_ Country	/	8. This corporation owes the current year Ir		□No	
24	25	29 30	0		Personal Property Tax.		LINO	
	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New Registered	Agent		
001	DOTEIN IDV	*	"	INAITIC				
GOLDSTEIN, IRV			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
₹ 6 7880 N ÚNIVERSITY DR SUITE 100			83	1	ा विश्वी क्षेत्र शिक्षा है । इ. है है कि के कि कि कि कि कि कि	g initi gerir beiet	180084055	
TAMARAC FL 33321			63	'			1	
IMMARAO EL 30021			84	City	1 . 153 30 31 21 411	* ' 85 ' Zip'C	Code 90 1921	
<u> </u>	· · · · · · · · · · · · · · · · · · ·			<u> </u>		f changing its	rogistered	
11. Pursuant to office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State o n familiar with, and accept the obligation	and 607.1508, Florida Statutes f Florida. Such change was auth ons of, Section 607.0505, Florid	, the abov horized by la Statutes	re-named con the corpora s.	poration submits this statement for the purpose c tion's board of directors. I hereby accept the appo	pintment as re	gistered	
SIGNATURE								
OIONATORE .	Signature, typed or printed name of registered agent			nt signature requi	red when reinstating) 1.034 DATE	ND DIDECTO	DC (N) 40	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	Change	Addition	
TITLE	Р	☐ DELETE	1.1 TITLE	-	Part of the Control o	□ Outride		
NAME.	GOLDSTEIN, IRVING L		1.2 NAME					
STREET ADDRESS	2641 NE 47 ST			TADORESS				
CITY-ST-ZIP	LIGHTHOUSE FL 33064		1.4 CITY-5	ST-ZIP		☐ Change	Addition	
TITLE	ST	☐ DELETE	2.1 TITLE			□ cuange		
NAME	Poole, Keenan L		2.2 NAME					
STREET ADDRESS	10123 VESNAL COURT			T ADDRESS	•			
CITY-ST-ZIP	CORAL SPRINGS FL		2.4 CITY-	ST-ZIP		☐ Change	Addition	
TITLE		☐ DELETE	3.1 TITLE			□ cusids	☐ X0010011	
NAME	Control of the Contro		3.2 NAME	1			•	
STREET ADDRESS	1813 1816		3.3 STREE	TADORESS	· 查查力 持續轉換	en Krist	nord d	
CITY-ST-ZIP	ka ekiti. Kanangan		3.4. CITY-	ST-ZIP				
TITLE	Search Search	☐ DELETE	4.1 TITLE		。 一個主意學是在地區的自己發展對	i Mailiande,	PS - PShridian	
NAME			4, 2 NAME					
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP	<u> </u>		4.4 CITY-5	ST-ZIP	·	Change	☐ Addition	
TITLE		☐ DELETE	5.1 TITLE 5.2 NAME		, recognise rege			
NAME		•			The state of the s			
STREET ADDRESS	P			ET ADDRESS	A Company of the Comp			
CITY-ST-ZIP		□ DELETE	5.4 CITY-5 6.1 TITLE	51-ZIP	·	Change	Addition	
TITLE	W	☐ DELETE				□ Gliange		
NAME	2011		6.2 NAMÉ	1			,	
STREET ADDRESS	LA COLOR			TADDRESS			(	
CITY-ST-ZIP	\$ P. C.		6.4 CITY-S	ST-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.

SIGNATURE:

OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #