

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P97000107280

1. Corporation Name

S & G, INC.

Principal Place of Business

P.O. BOX 621433  
ORLANDO FL 32862-1433

Mailing Address

P.O. BOX 621433  
ORLANDO FL 32862-1433

FILED  
Jul 27, 1999 8:00 am  
Secretary of State

07-27-1999 90024 004 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/23/1997

4. FEI Number

APPLIED FOR 59-3493403

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 owes the current year  
Intangible Personal Property.



Yes



No

9. Name and Address of Current Registered Agent

DRAWDY, THERESA S  
201 A EAST RUBY AVE.  
KISSIMMEE FL 34741

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

Accounting Advantage Assoc., P.A.  
210 East Monument Ave.  
Kissimmee, FL 34741  
407-848-4008

FL

85

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

7-20-99

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME NEWTON, SONYA G

STREET ADDRESS P.O. BOX 621433

CITY-ST-ZIP ORLANDO FL 21832-1433

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-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.

SIGNATURE:

SIGNATURE REQUIRED

Date

Daytime Phone #

7-20-99

CR2E034 (5/99)

**ACCOUNTING  
ADVANTAGE  
ASSOCIATES, P.A.**

596517-9004-4  
P#1000107280

Theresa Drawdy, BSBA  
President/Accountant  
210 East Monument Avenue  
Kissimmee, Florida 34741  
Waterfront Square  
(407) 846-4008 Office  
(407) 870-5510 Fax

July 19, 1999

VIA U.S. MAIL

Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

RE: 59-3493403

Dear Sir:

Today on behalf of our client S & G, Inc., I contacted the Division of Corporations @ (850) 487-6059 regarding a second notice received for the Corporate Annual Report. After bank verification that the check initially submitted had not cleared, I was advised by your office to resubmit a check for \$150.00 along with the second notice.

Please contact this office should you require any additional information.

Sincerely,

Accounting Advantage Associates, P.A.

  
Becky Minervino  
Office Manager