



FILED
Mar 07, 2005 08:00 AM
Secretary of State

DOCUMENT # P98000017338 1. Entity Name C.T.G. INTERNATIONAL, INC.				Secretary of State	
Principal Place of Business 1101 S. ROGERS CIRCLE #17 BOCA RATON, FL 33487		Mailing Address 1101 S. ROGERS CIRCLE #17 BOCA RATON, FL 33487			
DO NOT WRITE IN THIS SPACE					
				01062005 No Chg-P CR2E034 (10/03)	
				4. FEI Number 65-0823438	
				Applied For Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PAJAUJIS, FRANK 7699 ESTRELLA CIRCLE BOCA RATON, FL 33433				DO NOT WRITE IN THIS SPACE	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		P PAJAUJIS, FRANK 7699 ESTRELLA CIRCLE BOCA RATON, FL 33433		U000000254182 03/07/05-80064-012 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		V HOWER, ALAN E 17703 BONIELLO DRIVE BOCA RATON, FL 33496			
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO NOT WRITE IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP					
12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Frank Pajaujis</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
3/2/05 561-994-6788 <small>Date Daytime Phone #</small>					