

**2004 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jun 01, 2004 08:00 AM**  
**Secretary of State**

DOCUMENT # N99000007390

1. Entity Name  
GRACE INTERNATIONAL, INC.



Principal Place of Business  
3300 PEMBROKE ROAD #22  
HOLLYWOOD, FL 33021

Mailing Address  
% GUY D. SPERDUTO, CPA  
8982 TAFT STREET  
PEMBROKE PINES, FL 33023



05252004 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
65-1025118

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

JEUNE, JOEL R BISHOP  
114 THOMAS ROAD  
HOLLYWOOD, FL 33023

**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable

**Filing Fee is \$61.25  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ \$5.00 May Be  
Added to Fees

**10. OFFICERS AND DIRECTORS**

TITLE PD  
NAME JEUNE, JOEL R BISHOP  
STREET ADDRESS 114 THOMAS ROAD  
CITY-ST-ZIP HOLLYWOOD, FL 33023

TITLE VPD  
NAME JEUNE, DORIS L  
STREET ADDRESS 114 THOMAS ROAD  
CITY-ST-ZIP HOLLYWOOD, FL 33023

TITLE SD  
NAME REYES-TELASCO, NICOLE  
STREET ADDRESS 11543 NW 6TH COURT  
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

1000000161890  
06/01/04-000005-014 61.25

**DO NOT WRITE  
IN THIS SPACE**

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 617, 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: Rev. Joel R. Jeune  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

May 27, 2004 954-983-3405  
Date Daytime Phone #