

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Feb 24, 2002 8:00 am
Secretary of State

02-24-2002 90005 049 ***150.00

DOCUMENT # P 00000 107265
1. Entity Name
GRANA PARMALANO CORPORATION ✓

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
1031 IVES DAIRY ROAD
Suite, Apt. #, etc. 228

3. Mailing Address
3993 HUNTINGDON PIKE
Suite, Apt. #, etc. 201

DO NOT WRITE IN THIS SPACE

City & State
NORTH MIAMI BEACH FL

City & State
HUNTINGDON VALLEY PA

Zip
33179

Country
USA

Zip
19006

Country
USA

4. FEI Number 65-1061028

Applied For
☐ Not Applicable

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
ANTHONY J. FILITI

Street Address (P.O./Box Number is Not Acceptable)
3800 NE 107TH AVE #1003

City
AVENTURA FL

Zip Code
33180

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.
☐ (See criteria on back)

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FILITI ANTHONY J. 3800 NE 107TH AVE #1003 AVENTURA, FL 33180
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IN THIS SPACE**

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 1.19.07(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 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: Anthony J. Filiti ANTHONY J. FILITI 1-31-2002 609-304-6114

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034B (12/01)