## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000079315

Entity Name: GRP INVESTMENTS. INC.

PEREZ, ROBERTA

MIAMI, FL 33131

770 CLAUGHTON DR., 916

Name:

Address:

City-St-Zip:

FILED Jan 04, 2006 Secretary of State

Littly Na	IIIe. GRE IIIV	LOTIVILIVIO, INC.			
Current Principal Place of Business:			New Principal Place of Business:		
3490 NW MIAMI, FL	125TH STREE 33167	Т			
Current Mailing Address:			New Mailing Address:		
3490 NW MIAMI, FL	125TH STREE 33167	Т			
FEI Number	: 56-2282424	FEI Number Applied For()	FEI Number Not App	licable ( ) Certificate of Status Desired ( )	
Name and	d Address of C	Current Registered Agent:	Name and	Address of New Registered Agent:	
PEREZ, C 3490 NW MIAMI, FL	125TH STREE	Т			
The above in the State	e named entity : e of Florida.	submits this statement for the	purpose of changing i	its registered office or registered agent, or both,	
SIGNATU	RE:				
	Electror	nic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financin	g Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	P ( ) PEREZ, CARL 4971 SW 104 T COOPER CITY	ΓR.	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	VP (X PEREZ, GRAC 3 GROVE ISLE COCONUT GR	DR., #701	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	S ( ) PEREZ, JOHN 10483 HARREF PLANTATION, I	R ST.	Title: Name: Address: City-St-Zip:	VP (X) Change ( ) Addition PEREZ, JOHN DAVID 10483 HARRER ST. PLANTATION, FL 33324	
Title:	т (	Delete	Title:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: CARL A. PEREZ PRES 01/04/2006