2005 FOR PROFIT CORPORATION

SIGNATURE:

Apr 30, 2005 08:00 AM Secretary of State **ANNUAL REPORT DOCUMENT # P03000083886** GRAND REALTY, INC. Principal Place of Business Mailing Address 4038 LITTLE RD 4038 LITTLE RD NEW PORT RICHEY, FL 34655 NEW PORT RICHEY, FL 34655 04282005 No Chg-P CR2E034 (10/03) DO NOT WRITE IN THIS SPACE 4. FEI Number Applied For 20-0126808 Not Applicable \$8.75 Additional 5. Certificate of Status Desired _ _ _ Fee Required 6. Name and Address of Current Registered Agent GRANDE, MICHELE D DO NOT WRITE 4038 LITTLE RD NEW PORT RICHEY, FL 34655 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 Fiorida. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution After May 1, 2005 Fee will be \$550.00 Added to Fees OFFICERS AND DIRECTORS 10. PSTD TITLE GRANDE, MICHELE D NAME STREET ADDRESS 4038 LITTLE RD U00000347869 CITY-ST-ZIP NEW PORT RICHEY, FL 34655 05/02/05-80001-011 150.00 NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. I hereby certify that the information supplied with this filling 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 truesless 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.

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED