## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



ELORIDA DEPARTMENT DE STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000041240 (8)

GRS MANAGEMENT OF BROWARD INC.

4431 5.W. 64 TO AVI

Principal Place of Business

2. Principal Place of Business

Mailing Address

7501 SW 138TH COURT MIAMI FL 33183

Suite, Apt #, etc

*33*3/4

GISPERT, JOSE M

**MIAMI FL 33183** 

7501 SW 138TH COURT

City & State

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7501 SW 138TH COURT MIAMI FL 33183-3032

2a. Mailing Address

City & State

DAVIC

Suite, Apt. #, etc.

*333*/4

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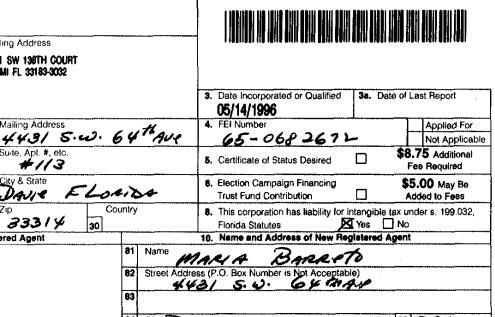
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9. Name and Address of Current Registered Agent

## FILED Jan 29 1997 8:00am Secretary of State



63 84 City Zip Code Ugule 333/Y 11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am farmar with, and accept the obligations of, Section 607 0505, Florida Statutes. 1/13/97 MARIA SIGNATURE required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) Change Addition TITLE DELETE 1.1 TITLE \* CHATHAY MARIA BARRETO, MARIA 1.2 NAME NAME 038 5 W 14038 SW 47TH LANE STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33175** 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change DELETE. TITLE 2.1 TITLE GISPERT, ANA I NAME 2.2 NAME 7501 SW 138TH COURT STREET ADDRESS 2.3 STREET ADDRESS MIAM! FL 33183 CITY - ST - ZIP 2. 4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE GILBERT, JOSEPH NAME 3.2 NAME 3900 WOODLAKES BLVD #202 STREET ADDRESS 3.3 STREET ADDRESS LAKE WORTH FL 33467 3.4. CITY - ST- ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE ٧S GISPERT, JOSE M NAME 4.2 NAME 7501 SW 138TH COURT STREET ADDRESS 4.3 STREET ADDRESS **MIAMI FL 33183** 44 CITY-ST-ZIP CITY - ST - ZIP DELETE ☐ Change Addition 51 TITLE TITLE 52 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST- ZIP CITY-ST-Z-P Change Addition DELETE TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - ST-ZIP 14. I do 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

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information indicated on this annual report or supplemental annual 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

MARIA Barreto 1/3/97