DOCUMENT # P9900093750 1. Entity Name GROVE TRADING DEVELOPMENT, INC.						FILED Jan 12, 2001 8:00 am Secretary of State				
Principal Plac 244 W. HILLSBO DEERFIELD BEA	ORO BLVD.	Mailing Address 244 W. HILLSBORO BLVD. DEERFIELD BEACH FL 33441				01-12-2001 90004 005 ***150.00				
2. Principal P				DO NOT WRITE IN THIS SPACE						
City & State	· · · · · · · · · · · · · · · · · · ·	Suite, Apt. #, etc. City & State			4.	4. FEI Number 65-0956702 Applied For Not Applicable				
Zip Country		Zip Country			5.	S. Certificate of Status Desired S8.75 Additional Fee Required				
	6. Name and Address of Current I	Registered Agent			7.	Name and Address of New Registere	d Agent			
HO, MEI YING 3681 TURTLE RUN BLVD., #1133 CORAL SPRINGS FL 33067				Street Addres	s (P.O. I	Box Number is Not Acceptable)				
				City		F	L Zip C	ode		
SIGNATURE	named entity submits this statement for Signature, typed or printed name of registered agent a			ed office or regis						
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! After MAY 1, 2001 Make Check Payable				ee will be \$550.00		10. Election Campaign Financing \$5.00 May Be Trust Fund Contribution.				
11.	OFFICERS AND I		12.		Αſ	DDITIONS/CHANGES TO OFFICERS AT			(00/0	
NAME STREET ADDRESS CITY-ST-ZIP	D Delete HO, MEI YING 3681 TURTLE RUN BLVD., #1133 CORAL SPRINGS FL 33067			TLE ME REET ADDRESS TY-ST-ZIP			☐ Chang	ge 🔲 Addition	CR2E034 (10/00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		F			☐ Chang	ge 🗌 Addition		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		Y			Chang	ge 🔲 Addition		
indicated of the corp	certify that the information supplied with on this report or supplemental report is poration or the receiver or trustee empo or on an attachment with an address, w	true and accurate and that i wered to execute this report	my signat t as requi	ture shall have th	e same	legal effect as if made under oath; that ida Statutes; and that my name appears	I am an offic	cer or director		
SIGNAT		RINTE NAME OF SIGNING OFFICER	OR DIRECT	ОЯ		1/3/8/ 7	Daytime Phone	**		