

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S65039 (7)

1. Corporation Name

GRANOLA DISK, INC.

Principal Place of Business

Mailing Address

20505 US 19 N.
STE. 12-197
CLEARWATER FL 34624
US

20505 US 19 N.
STE. 12-197
CLEARWATER FL 34624
US



2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt #, etc

26 Suite, Apt #, etc

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qual Fed

07/05/1991

3a. Date of Last Report

05/01/1995

4. FEI Number

59-3072821

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 190.03?
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

MARGOLIN, SHAWN E.
1802 N. SUNSET PT. RD.
CLEARWATER FL 34625

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

2109 Gulf Blvd #2A

83 Indian Beach Villas II

84 City

Clearwater Indian Rocks Beach FL

85 Zip Code

34635

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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Shawn Margolin

President Shawn Margolin

8/1/96

Date

12. OFFICERS AND DIRECTORS

TITLE PST
NAME MARGOLIN, SHAWN E.
STREET ADDRESS 1802 N. SUNSET PT. RD.
CITY-ST-ZIP CLEARWATER FL

TITLE D
NAME MARGOLIN, SHAWN E.
STREET ADDRESS 1802 N SUNSET PT. RD.
CITY-ST-ZIP CLEARWATER FL

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE
12 NAME
13 STREET ADDRESS 2109 Gulf Blvd #2A
14 CITY-ST-ZIP Indian Rocks Beach, FL 34635

21 TITLE
22 NAME
23 STREET ADDRESS 2109 Gulf Blvd #2A
24 CITY-ST-ZIP Indian Rocks Beach, FL 34635

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Shawn Margolin

Shawn Margolin

8/1/96

Date

813 595 0750

Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (3/96)