



**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 07, 2008 08:00 A
Secretary of State

DOCUMENT # P02000102235 1. Entity Name GRAND SYSTEMS COMPUTERS, INC.	
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Principal Place of Business 20283 STATE RD 7 SUITE 300 BOCA RATON, FL 33498	Mailing Address 20283 STATE RD 7 SUITE 300 BOCA RATON, FL 33498
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DO NOT WRITE IN THIS SPACE



01052008 No Chg-P CR2E034 (11/05)

4. FEI Number 51-0428546	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent SILVA JUNIOR, AGNOS F 20283 STATE RD. 7 STE. 300 BOCA RATON, FL 33498	DO NOT WRITE IN THIS SPACE
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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 Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

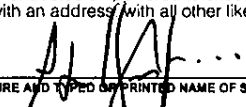
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SILVA JUNIOR, AGNOS F 20283 STATE RD 7 SUITE 300 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TEIXEIRA, LUCILENE S 20283 STATE RD 7 SUITE 300 BOCA RATON, FL 33498
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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01/07/08-80017-023 158.75

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address with all other like empowered.

SIGNATURE:  **01/04/2008 561-883-8133**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #