

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 09, 2003 8:00 am
Secretary of State

04-09-2003 90168 013 ***150.00

DOCUMENT # P93000012237

1. Entity Name
GRAN CORPORATION



Principal Place of Business
8405 NW 53 STREET
MIAMI FL 33166
US

Mailing Address
8405 NW 53 STREET
MIAMI FL 33166
US

2. Principal Place of Business

3. Mailing Address

fb SUAREZ, CEBALLOS & ORTIZ

Suite, Apt. #, etc.
354 SEVILLA AVE.

City & State
CORAL GABLES FL

Zip
33134

Country
USA



☒ CHECK HERE IF MAKING CHANGES

4. FEI Number **65-0392013**

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

SCHLAGETER, MARINA
1101 BRICKELL AVE
301-S
MIAMI FL 33131

Name

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

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| | | |
|-----------------------|--------------------------------|---------------------------------|
| TITLE | PD | <input type="checkbox"/> Delete |
| NAME | DE SOSA, MARINA S | |
| STREET ADDRESS | 8405 NW 53 STREET C-102 | |
| CITY-ST-ZIP | MIAMI FL 33166 | |
| TITLE | VPSD | <input type="checkbox"/> Delete |
| NAME | SOSA, ALBERTO J | |
| STREET ADDRESS | 8405 NW 53 STREET C-102 | |
| CITY-ST-ZIP | MIAMI FL 33166 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | SOSA, GUILLERMO | |
| STREET ADDRESS | 8405 NW 53 STREET C-102 | |
| CITY-ST-ZIP | MIAMI FL 33166 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | SOSA DE HOYER, MARINA | |
| STREET ADDRESS | 8405 NW 53 STREET C-102 | |
| CITY-ST-ZIP | MIAMI FL 33166 | |
| TITLE | | <input type="checkbox"/> Delete |
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| STREET ADDRESS | | |
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| TITLE | | <input type="checkbox"/> Delete |
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| TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

12. I 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 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:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-7-03 305-582-7850

Date

Daytime Phone #

CR2E034 (10/02)