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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # 531808 1. Corporation Name

GRECA INVESTMENT, INC.

## Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90102 031 \*\*\*150.00



Principal Place of Business Mailing Address 3002 STRAWBERRY OFC.  PASADENA TX 77502 PASADENA TX 77502	
PASADENA TX 77502 PASADENA TX 77502	
i DO N	NOT WRITE IN THIS SPACE
3. Date Incorporated or <b>04/19/1977</b>	
2. Principal Place of Business 2a. Mailing Address 4. FEI Number	Applied For
21 59-1938768	Not Applicable
Suite, Apt. #, etc.  Suite, Apt. #, etc.  5. Certifcate of Status D	\$8.75 Additional
27 3. Certificate of Citatos 6	
City & State City & State 6. Election Campaign F	- II
23 Trust Fund Contributi	
	s the current year Intangible lax. ☐ Yes ☐ No
24 25 29 30 Personal Property Ta	of New Registered Agent
9. Name and Address of Current Registered Agent 10. Name and Address 81 Name	or new registered rigers
MAKRIS, PETER	
2110 DREW ST 82 Street Address (P.O. Box Number is No	ot Acceptable)
CLEARWATER FL 34625	· · · · · · · · · · · · · · · · · · ·
84 City	FL 85 Zip Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this stateme office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I here agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  (NOTE: Registered Agent signature required when reinstating)	eby accept the appointment as registered
	S TO OFFICERS AND DIRECTORS IN 12
TITLE PT DELETE 1.1 TITLE	☐ Change ☐ Addition
NAME PAPPAS, PETER 1.2 NAME	
STREET ADDRESS 3002 STRAWBERRY 1.3 STREET ADDRESS	
CITY-ST-ZIP PASADENA TX 77502 1.4 CITY-ST-ZIP	
TITLE O . DELETE 2.1 TITLE	Change Addition
NAME PAPPAS, BESSIE 22 NAME	
STREET ADDRESS 3002 STRAWBERRY 2.3 STREET ADDRESS	
CITY-ST-ZIP PASADENA TX 77502 2.4 CITY-ST-ZIP	: 2.
TITLE DELETE 3.1 TITLE	☐ Change ☐ Addition
NAME 32 NAME	
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-ST-ZIP 3.4. CITY-ST-ZIP	☐ Change ☐ Addition
TITLE DELETE 4.1 TITLE	Change — Addition
NAME 4, 2 NAME	
■	
STREET ADDRESS 4.3 STREET ADDRESS	
CITY-ST-ZIP 44 CITY-ST-ZIP	☐ Channe ☐ Addition
CITY-ST-ZIP 44.CITY-ST-ZIP  TITLE DELETE 5.1.TITLE  5.2.NAME	☐ Change ☐ Addition
CITY-ST-ZIP         44 CITY-ST-ZIP           TITLE         DELETE         51 TITLE           NAME         52 NAME         52 NAME	☐ Change ☐ Addition
CITY-ST-ZIP         44 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS           54 CITY ST. 7ID         5.4 CITY ST. 7ID	☐ Change ☐ Addition
CITY-ST-ZIP         4.4 CITY-ST-ZIP           TITLE         □ DELETE         5.1 TITLE           NAME         5.2 NAME           STREET ADDRESS         5.3 STREET ADDRESS           CITY-ST-ZIP         5.4 CITY-ST-ZIP	
CITY-ST-ZIP         44 CITY-ST-ZIP           TITLE         DELETE         5.1 TITLE           NAME         52 NAME           STREET ADDRESS         5.3 STREET ADDRESS           54 CITY ST. 7ID         5.4 CITY ST. 7ID	☐ Change ☐ Addition ☐ Change ☐ Addition

CITY-ST-ZIP 14. 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 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: