

**2005 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED

**Jan 06, 2005 08:00 AM
Secretary of State**

DOCUMENT # 624079

1. Entity Name
GR INDUSTRIES, INC.



Principal Place of Business
**1331 S. DIXIE HWY
POMPANO BCH, FL 33060**

Mailing Address
**1331 S. DIXIE HWY
POMPANO BCH, FL 33060**



01042005 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-1911213

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**GERUM, ALBERTA
1741 SW 36TH AVE
FT LAUDERDALE, FL 33312**

**DO NOT WRITE
IN THIS SPACE**

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

Alberta Gerum

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

(NOTE: Registered Agent signature required when reinstating)

1/4/05

DATE

**FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	GERUM, JEFFREY M
STREET ADDRESS	2051 NE 59TH PL
CITY-ST-ZIP	FT LAUDERDALE, FL 00000,
TITLE	SD
NAME	GERUM, ALBERTA
STREET ADDRESS	1741 SW 36TH AVE
CITY-ST-ZIP	FT LAUDERDALE, FL 00000,
TITLE	V
NAME	GERUM, LINDA
STREET ADDRESS	2051 NE 59TH PL
CITY-ST-ZIP	FT LAUDERDALE, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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01/06/05-80015-014 150.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(f), 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 employees.

SIGNATURE:

Alberta Gerum

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1/4/05 954-781-0321