

2006 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 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		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number 59-1911213	
5. Name and Address of Current Registered Agent GERUM, ALBERTA 1741 SW 36TH AVE FT LAUDERDALE FL 33312		7. Name and Address of New Registered Agent 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 _____ (NOTE: Registered Agent signature required when reconstituting)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing \$5.00 May Trust Fund Contribution. ☐ Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11.		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GERUM, JEFFREY M 2051 NE 59TH PL FT LAUDERDALE, FL 00000	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GERUM, ALBERTA 1741 SW 36TH AVE FT LAUDERDALE, FL 00000	☐ Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GERUM, LINDA 2051 NE 59TH PL FT LAUDERDALE FL	☐ Delete			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete			



1st MOORE CR2E034 (10/05)

Applied For
Not Applicable

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

City **FL** Zip Code

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

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02/16/06-80037-008 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Alberta Gerum **ALBERTA GERUM** 2/2/06 954-781-1311