


2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 14, 2008 8:00 am
Secretary of State

08-14-2008 90002 016 ***150.00

DOCUMENT # F07000000900	
1. Entity Name GRUS, INC.	

Principal Place of Business 380 PARK PLACE #100 CLEARWATER, FL 33759	Mailing Address 11430 HAMILTON AVENUE CINCINNATI, OH 45231
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2. Principal Place of Business - No P.O. Box #	3. Mailing Address 380 PARK PLACE BLVD
Suite, Apt. #, etc.	Suite, Apt. #, etc. SUITE 100
City & State	City & State CLEARWATER, FL
Zip	Country 33759 US



07142008 Chg-P CR2E034 (12/06)

6. Name and Address of Current Registered Agent BAILEY, JONATHAN 380 PARK PLACE #100 CLEARWATER, FL 33759	
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4. FEI Number 31-1287633	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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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 _____
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 Due by September 12, 2008	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P BAILEY, JONATHAN 380 PARK PLACE #100 CLEARWATER, FL 33759 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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 an other like empowered.

SIGNATURE: *Jon Bailey* **8-12-08** **513-742-9294**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #