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Jan 24 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F92957

(2)

1. Corporation Name:

THE EIGHT GRIFFIN CORPORATION

Principal Place of Business

% RICHARD A GRIFFIN
10141 SW 16 PL
DAVIE FL 33324

Mailing Address

% RICHARD A GRIFFIN
10141 SW 16 PL
DAVIE FL 33324-7411

3. Date Incorporated or Qualified
08/02/1982

3a. Date of Last Report
02/12/1996

4. FEI Number

59-2305991

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

TIMOTHY P. GRIFFIN
10141 SW 16TH PLACE
DAVIE FL 33324

81 Name

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

83

84 City

FL

85 Zip Code

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered 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 fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE DTS ☐ DELETE

NAME GRIFFIN, TIMOTHY P
STREET ADDRESS 13730 SW 16TH ST
CITY- ST- ZIP DAVIE FL

TITLE VD ☐ DELETE

NAME GRIFFIN, DANIEL D, SR
STREET ADDRESS 13730 SW 16TH ST
CITY- ST- ZIP DAVIE FL

TITLE PD ☐ DELETE

NAME GRIFFIN, JEFFREY W
STREET ADDRESS 13730 SW 16TH ST
CITY- ST- ZIP DAVIE FL

TITLE D ☐ DELETE

NAME GRIFFIN, PAMELA J
STREET ADDRESS 13730 SW 16TH ST
CITY- ST- ZIP DAVIE FL

TITLE D ☐ DELETE

NAME GRIFFIN, RICHARD A JR
STREET ADDRESS 13730 SW 16TH ST
CITY- ST- ZIP DAVIE FL

TITLE D ☐ DELETE

NAME GRIFFIN, JANET L
STREET ADDRESS 13730 SW 16TH ST
CITY- ST- ZIP DAVIE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY- ST- ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY- ST- ZIP

14. I do 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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TIMOTHY P. GRIFFIN

(954) 389-0003

1/14/97

Date

Daytime Phone #

CR2E034 (9/96)