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

PROFIT CORPORÁTION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # F9800005971 1. Corporation Name

GRT VIII, INC.

FILED Feb 01, 1999 8:00am **Secretary of State**

02-01-1999 90014 039 ***150.00



Principal Place	of Business	Mailing Address							
400 S. EL CAMINO REAL. #1100 400 S. EL CAMINO REAL. #1100									
SAN MATEO CA	1.94402-1708 has one of the same of the same	SAN MATEO CA 9	1402-1708			DO NOT WRITE IN THIS	CDACE	. 4	
. * .							3FACE		
						3. Date Incorporated or Qualifed		`	
	e y e					10/27/1998			
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	App	olied For	3
21	Company of the control of the control	26				94-3311279	Not	Applicable	1
Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired	\$8.75 A		ë
22 27						5. Certificate of Status Desired	Fee Rec	luired	_
City & State	3 10 10 10	City & State	City & State			6. Election Campaign Financing	\$5.00	May Be	
23 28						Trust Fund Contribution	Added to		١,
Zip	Country	Zip				8. This corporation owes the current year Intangible			
─ ─	;	29	30			Personal Property Tax.			
24	25 9. Name and Address of Current					10. Name and Address of New Registered Agent			
	9. Name and Address of Content	TO TO SERVE TO 1		81	Name				
СТ	CORPORATION SYSTEM	elic class processes at a						,	
GEST 1200 SOUTH PINE ISLAND ROAD				82	Street Add	ress (P.O. Box Number is Not Acceptable)		}	
1=11						g granden den eine eine gute unter beite beite beite beite beite beite	garbi attig (Bill)	1444 (451 (54) 1444 (451 (54)	
PLANTATION:FL 33324				83					
				84	City	21/2/18/ 13/14/19/19/19/19/19/19/19/19/19/19/19/19/19/	85 Zip C	óde	
		arbos de el 17 de 200	a notation states	1.1	•	<u>FL</u>	,		
11. Rursuant	to the provisions of Sections 607.0502	and 607.1508, Florid	a Statutes, the a	bove	-named corp	poration submits this statement for the purpose of	changing its	registered	
" office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	i Fiorida, Such chano	e was authonze	a by t	ine corporati	on's board of directors. I hereby accept the appoi	iunent as reg	listered	
_	m familiar with, and accept the obligation	MIS OI, OCCION 001.00	ooo, rionaa oia						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable	(NOTE: Registered	d Agent	t signature require	ed when reinstating) 4 (7.7.7) DATE			1
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	RS IN 12	3
TITLE	C	☐ DE	LETE 1.1 T	ITLE		99-8311279	☐ Change	☐ Addition	3
	BATINOVICH, ROBERT		12 N	IAME		20 C 416. 146.			; ا
NAME	ET ADDRESS 400 S. EL CAMINO REAL, #1100			1.3 STREET ADDRESS				ļ	3
STREET ADDRESS								ŀ	3
CITY-ST-ZIP	CP CP				-ZIP		Change	Addition	0
TITLE	I affile the second of the sec	ت ب				4	_ •		
NAME	BATINOVICH, ANDREW	_		IAME					
STREET ADDRESS	400 S. EL CAMINO REAL, #110		2.3 S	TREET	ADDRESS			'	
CITY-ST-ZIP	SAN MATEO CA 94402-1708			CITY-S	T- ZIP			□ Additio-	{
TITLE: P. T	Occasion System	The Control of the DE	LETE 3.1 T	TLE		1	☐ Change	Addition	1
NAME :	DALY, EUGENE		3.2 N	IAME					1
STREET ADDRESS	555 LAUREL ST., PENTHOUSE	#608	3.3 S	TREET	ADDRESS	(2)對於各类性為自由等指數的變形變形	1 2019 Silla 1811	接續揚灣	1
CITY-ST-ZIP	SAN MATEO CA 94401		3.4. 0	CITY-S	T-ZIP	[2] [1] [2] [2] [3] [3] [3] [3] [3] [3] [3] [3] [3] [3		問制問題	
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	SHAPIRO, ALAN			NAME					1
NAME S. SE. CA	400 S. EL CAMINO REAL, #110	0 (Maria 17)	435	TREET	ADDRESS				
STREET ADDRESS	SAN MATEO CA 94402-1708	1 1 1 1 1 1 1 1 1 1		CITY-ST			•	-	ĺ
CITY-ST-ZIP	0/11 MATEO OA 34402-1700	□ DE		TITLE	r-ur		Change	Addition	1
TITLE	ALIOTINI EDANIK E			IAME		f0727/15/28			
NAME	AUSTIN, FRANK E				· *DDDECC	growing the second			
STREET ADDRESS	400 S. EL CAMINO REAL, #110	U			ADDRESS	946311279			
CITY-ST-ZIP				CITY-ST	1-ZIP	A Charles Carles	Chanca	Addition	1
ПТLE	Aresta dan rational	DE		TITLE	-		Change		
NAME	GARNICK, TERRI O NEAL		6.21	AME	1				
STREET ADDRESS 400 S. EL CAMINO REAL, #1100				TREET	ADDRESS				l
	SAN MATEO CA 94402-1708	. '	640	CITY-SI	T-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 enrual 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 opporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attach tient with an address, with all other like empowered.

Frank E Austin, Secretary SIGNATURE:

(650) 343-9300