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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name G80736 (3)

GROVE DESIGNS INCORPORATED

FILED Feb 06 1998 8:00am Secretary of State

Principal Place of Business Mailing Address											
1149 S.W. 27TH AVE. SUITE 203 MIAMI FL 33135					1149 S.W. 27TH AVE. Suite 203 Miami Fl 33135						DO NOT WRITE IN THIS SPACE
											3. Date Incorporated or Qualified 12/15/1983
2. Principal P	2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For
21					26						59-2350247 Not Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.						5. Certificate of Status Desired
City & State					City & State						8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution □ Added to Fees
Zip	Country				Zip Country					8. This corporation owes or has paid the current year Intangible	
24	25			2	29	30					Personal Property Tax due June 30. 💢 Yes 🔲 No
g, Name and Address of Current					glete						10. Name and Address of New Registered Agent
PA	REDES, FR	ANCI	SCO W.					81	Nam	0	
	<mark>24 LA PL</mark> AY AMI FL 331:					82	Stree	et Address (P.O. Box Number is Not Acceptable)			
								83			
								84	City		FL 85 Zip Code
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 register 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 prated name of registered agent and little if applicable (NOTE Registered Agent a gnature required when reinstaling) DATE											
12.	Signature, typica	Or printe	OFFICERS A				13.	yc		ore required	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P					DELETE	1.1 7	ITLE		T	Change Addition
NAME	PAREDE	S. FF	RANCISCO W.				1.2 h	AME			
STREET ADDRESS	3824 LA						1.3.5	TREET	ADDRES:	;	
CITY-ST-2IP	MIAMI F						1.4 0	11Y-S	1 - Z (P		
TITLE						DELETE	2.1 T		<u>-</u>		Change Addition
NAME							2.2 N	AME			
STREET ADDRESS							2.3 \$	TREE 1	ADDRES:	;]	•
CITY-ST-ZIP	_						2.40	QTY - S	1-2IP		
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CITY-ST-ZIP							3.4. ()1Y-S	ST - 71P		
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CITY-ST-ZIP								11Y-S	T - ZIP	<u> </u>	
TITLE						☐ DELETE	6.11	TLE			Change L Addition
NAME							6.2 N				
STREET ADDRESS							6.3 S	TREET	ADDRES:	•	
CITY-ST-ZIP	L				-11		6.4 0	IY-S	I - 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 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 preciver 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 on any alachment with an address

Late 1-306305 662000