

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

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # J72970 (3)

1. Corporation Name
GRAND REALTY INTERNATIONAL, INC.

Principal Place of Business

4704 LE JEUNE RD
CORAL GABLES FL 33146
US

Mailing Address

4704 LE JEUNE RD
CORAL GABLES FL 33146-1817
US

2. Principal Place of Business

21 1221 BRICKELL AVE
Suite, Apt. #, etc.

22 9th FLOOR
City & State

23 MIAMI, FLA.
Zip

24 33129 Country
25 USA

2a. Mailing Address

26 MIAMI, FL 33129
Suite, Apt. #, etc.

27 9th FLOOR-1221 BRICKELL AVE
City & State

28 MIAMI
Zip

29 33129 Country
30 USA

3. Date Incorporated or Qualified
05/14/1987

3a. Date of Last Report
05/01/1996

4. FEI Number
65-0081677

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

9. Name and Address of Current Registered Agent

DOLAN, WILLIAM W.
4704 LEJEUNE RD.
CORAL GABLES FL 33146

10. Name and Address of New Registered Agent

81 Name
WILLIAM W. DOLAN
82 Street Address (P.O. Box Number is Not Acceptable)
1221 BRICKELL AVE.
83 9th FLOOR
84 City
MIAMI, FLA. FL 85 Zip Code
33129

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 William W. Dolan WILLIAM W. DOLAN 4/29/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME DOLAN, WILLIAM W.
STREET ADDRESS 4704 LEJEUNE RD.
CITY-ST-ZIP CORAL GABLES FL 33146

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD
1.2 NAME DOLAN, WILLIAM W.
1.3 STREET ADDRESS 1221 BRICKELL AVE, 9th FLOOR
1.4 CITY-ST-ZIP MIAMI, FLA. 33129

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
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 on an attachment with an address.

SIGNATURE: William W. Dolan WILLIAM W. DOLAN 4/29/97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILED
May 06 1997 8:00am
Secretary of State



CR2E034 (9/96)