2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT	# L0300026642
 Entity Name 	
GRUSAF, LLC	



Principal Place of Business 211 E. INTERNATIONAL SPEEDWAY BLVD #213 DAYTONA BEACH, FL 32118

Mailing Address 211 E. INTERNATIONAL SPEEDWAY BLVD #213 DAYTONA BEACH, FL 32118

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

AMON, FELIX 211 E. INTERNATIONAL SPEEDWAY BLVD., #213 DAYTONA BEACH, FL 32118

FILED May 05, 2005 8:00 am Secretary of State

05-05-2005 90023 011 ****50.00



03092005 No Chg-LLC

4. FEI Number

CR2E083 (10/03)

Applied For

0	5-0	58	066	8						Not Applicable
_					_		 _	\$5.0	າດ	Additional

5. Certificate of Status Desired

Additional Fee Required

DATE

DO NOT WRITE IN THIS SPACE

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.

(NOTE: Registered Agent signature required when reinstating)

SIGNATURE.

Signature, typed or printed name of registered agent and title if applicable

Filing Fee is \$50.00 Due by May 1, 2005

9.	MANAGING MEMBERS/MANAGERS					
TITLE	MORTH 1021 DAL Mg1-					
NAME	AMON, URSULA					
STREET ADDRESS	211 E INT'L SPEEDWAY BLVD #213					
CITY-ST-ZIP	DAYTONA BEACH, FL 32118					
TITLE	Mappe Mg K					
NAME	Felix Amon					
STREET ADDRESS	211 E Int'l Speedway Blue					
CITY-ST-ZIP	DAYTONA BEACH, FI 32118					
TITLE	•					
NAME						
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11. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver of trustee empowered to execute this report as required by Chapter 608, Florida Statutes.						
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SIGNATURE: My My						
	SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZE	D REPRESENTATIVE Date Di	tytime Phone #			