

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # L25169

1. Corporation Name

GRANOFSKY HOLDINGS AMERICA, INC.

Principal Place of Business

Mailing Address

4000 ISLAND BV APT 2202
N. MIAMI BCH FL 33160

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified

10/24/1989

3a. Date of Last Report

03/04/1994

2. Principal Place of Business

2a. Mailing Address

21 2255 GLADES ROAD

26 2255 GLADES ROAD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 324A

27 324A

City & State

City & State

23 BOCA RATON FL

28 BOCA RATON FL

Zip

Country

Zip

Country

24 33431

25 U.S.A.

29 33431

30 U.S.A.

4. FEI Number

65-0156780

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

10. Name and Address of New Registered Agent

TERREMARK CORPORATE AGENTS, INC.
2601 So. Bayshore Dr., 19th Fl.
Miami, Fl. 33133

81 Name

COBER CORPORATE AGENTS, INC.

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

2601 So. Bayshore Dr., 19th Fl.

83

84 City Miami

FL

85 Zip Code 33133

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 person signing in Block 11

BERNSTEIN, SECRETARY

(NOTE: Registered Agent signature required when reinstating)

3/28/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DP
NAME GRANOFSKY, DAVID
STREET ADDRESS 4000 ISLAND BV APT 2202
CITY-ST-ZIP N MIAMI BCH FL 33160

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

TITLE DVP
NAME GRANOFSKY RICHARD
STREET ADDRESS 4000 ISLAND BV APT 1905
CITY-ST-ZIP N MIAMI BCH FL 33160

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

4118 N.W. 60 CIRCLE
BOCA RATON FL 33496

TITLE DST
NAME SHAPIRO, LOUISE
STREET ADDRESS 35 LYNCREFT
CITY-ST-ZIP HAMPSHIRE QUEBEC CA

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

800001786938
-04/19/96--01026--005
***200.00

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

RICHARD GRANOFSKY

APRIL 9 1996

514 3939292

Date

Daytime Phone #

56 41-19-96