

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

FILED

**May 07 1998 8:00am
Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # L37827 (7)

1. Corporation Name
GRD PROPERTIES, INC.



Principal Place of Business 4431 SW 64TH AVE SUITE 122 DAVIE FL 33314-3458 US	Mailing Address 4431 SW 64TH AVE SUITE 122 DAVIE FL 33314-3458 US
---	---

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
12/21/1989

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	26. 13451 Mustang Trail
22. City & State	27. Suite, Apt. #, etc.
23. Zip	28. Fort Lauderdale, FL
24. Country	29. 33330
	30. Broward

4. FEI Number 65-0189470	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

**HULMES, DONALD W.
4431 SW 64TH AVE
SUITE #115
DAVIE FL 33314**

10. Name and Address of New Registered Agent

81. Name **Hulmes, Donald W.**

82. Street Address (P.O. Box Number is Not Acceptable)
13451 Mustang Trail

83. City **Fort Lauderdale** FL 85. Zip Code **33330**

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DP HULMES, DONALD W.	1.2 NAME	Hulmes, Donald W
STREET ADDRESS	4431 SW 64TH AVE	1.3 STREET ADDRESS	13451 Mustang Trail
CITY-ST-ZIP	DAVIE FL	1.4 CITY-ST-ZIP	Fort Lauderdale, FL 33330
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DV PERRY, HENRY D., JR.	2.2 NAME	
STREET ADDRESS	3866 SHERIDAN ST	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DS HULMES, NANCY	3.2 NAME	
STREET ADDRESS	4431 SW 64TH AVE	3.3 STREET ADDRESS	
CITY-ST-ZIP	DAVIE FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DT PERRY, MARGARETTE	4.2 NAME	
STREET ADDRESS	3866 SHERIDAN ST	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-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 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 _____

CR2E034 (10/97)