2005 FOR PROFIT CORPORATION **ANNUAL REPORT (AR)**

Apr 07, 2005 8:00 am Secretary of State DOCUMENT # L46307 1. Entity Name 04-07-2005 90029 025 ***158.75 GRUENTHAL CONSTRUCTION & DEVELOPMENT CORP. Principal Place of Business Mailing Address 200 LINDELL BLVD. 200 LINDELL BLVD. 50034576 DELRAY BEACH FL 33483 **DELRAY BEACH FL 33483** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E034 (10/04) City & State City & State 4. FEi Number Applied For 65-0195866 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent GRUENTHAL, ROBERT Street Address (P.O. Box Number is Not Acceptable) 7477 SAN SEBASTIAN DR **BOCA RATON FL 33433...** Zip Code 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2005 Fee Will Be \$550.00 Make Check Payable to Florida Department of State Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE TITLE Delete ☐ Change ☐ Addition GRUENTHAL, ROBERT NAME NAME 7477 SAN SEBASTIAN DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33433** CITY-ST-ZIP ☐ Detete ☐ Change Addition GRUENTHAL, KRISTIAN R NAME STREET ADDRESS 6331 WALK CIR. STREET ADDRESS **BOCA RATON FL 33433** CITY-ST-ZIP CITY-ST-7IP SECRETARY JULIE GRUENTHAL Delete Addition TITLE TITI F NAME NAME 7977 SAN SEGASTIAN DRIVE STREET ADDRESS 21HEET HOUNESS BOCA RATON, FL. 33433 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 12. 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 report or supplemental 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 epon as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like improvement.

FILED