

FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90169 030 \*\*\*150.00

DOCUMEN	#.	l 61	007
1. Corporation Name			001

THE GRAND BAY CORPORATION

Principal Place of Business
4525 N.W. 37TH AVE. MIAMI FL 33142 US
2. Principal Place of Busine
Suite, Apt. #, etc.
<u></u>
City & State
23 Miami, FL
Zip
24 33169

Mailing Address

4525 N.W. 37TH AVE. MIAMI FL 33142

DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 03/29/1990 4. FEI Number Applied For 2a. Mailing Address of Business 167th Street P.O. Box 694120 56-1693044 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 City & State \$5,00 May Be **Etection Campaign Financing** Added to Fees 28 MIami, Trust Fund Contribution FLThis corporation owes the current year Intangible Personal Property Tax. Country Country Zip 25 30 Personal Property Tax. 29 9. Name and Address of Current Registered Agent <u>. S</u> 10. Name and Address of New Registered Agent 81 Name GLAUBER, LAWRENCE H. Street Address (P.O. Box Number is Not Acceptable) 82 4525 NW 37TH AVENUE MIAMI FL 33142 83 84 City Zip Code

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 registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change ☐ Addition ☐ DELETE 11 TITLE TITLE GLAUBER, LARRY 1.2 NAME NAME 4525 N.W. 37TH AVENUE 1.3 STREET ADDRESS STREET ADORESS MIAMI FL CITY-ST-ZIP 14 CITY-ST-ZIP DELETE ☐ Change Addition 2.1 TITLE TITLE D ECO, ORO 22 NAME NAME 4525 N.W. 37TH AVENUE 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 2.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE CARTMAN, GARY 3.2 NAME NAME 4525 NW 37TH AVE 3.3 STREET ADDRESS STREET ADDRESS MIAMI FL 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition ☐ DELETE 4.1 TITLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP TT DELETE ☐ Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 61 TITLE ☐ Chande Addition TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 C/TY+ST-7!P 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 c achment with an address, with all other like empowered

SIGNATURE:

CR2E034 (11/98)