06251999-90002-042-\$150.00-\$150.00 FILED Jun 25, 1999 8:00 am CURPURATION Katherine Harris ANNUAL REPORT Secretary of State **Secretary of State** 1999 **DIVISION OF CORPORATIONS** 06-25-1999 90002 042 ***150.00 **DOCUMENT # L72505** 07-13-1999 90002 038 ***400.00 GR SYSTEMS, INC. 586810 - 90002 - 38 Mailing Address Principal Place of Business 33 E. ROBINSON ST. 33 E. ROBINSON ST. SLETTE 200 DO NOT WRITE IN THIS SPACE ORLANDO FL 32801 ORLANDO FL 32801 3. Date incorporated or Qualifed U\$ HS 05/10/1990 Applied For 4. FEI Number 58-1210805 Not Applicabl 26 \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 \$5.00 May Be 6. Election Campaign Financing Added to Fees Trust Fund Contribution 28 8. This corporation owes the current year intangible Country Yes □No Personal Property Tax. 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MANTZARIS, DANIEL F., ESQ. Street Address (P.O. Box Number is Not Acceptable) 82 120 S. ORANGE AVENUE ORLANDO FL 32801 83 City Zip Code 84 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 familier with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ Additi Change □ DELETE 11 TIDE TIRLE WHEELER, RICHARD S. 1.2 NAME NAME 33 E. ROBINSON ST. 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 1.4 CTY-ST-ZIP CITY-ST-ZIP Change Addit COPLETE 21 TITLE TILE WHEELER, JACK C. 22 NAME NAME 33 E. ROBINSON ST. 2.3 STREET ADDRESS STREET ADDRESS ORLANDO FL: 2.4 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Additi-DELETE DST TITLE WHEELER, TAMMY 3.2 NAME NAME 33 E. ROBINSON ST. 3.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Acdition DELETE 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRES 44 CITY-ST-ZIP CITY-ST-ZP Additik ☐ Change □ DELETE 5.1 TITLE TITLE 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 City-St-ZP CITY-ST-ZIP ☐ Change ☐ Additix DELETE 6.1 TITLE TITLE NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY-ST-ZIP 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 807, Florida Statutes: and that my name appears in Block 12 or Block 13 if chapter 13 if chapter with an address with a address with an address with an address with an address with an address with a