		re May 1, 19 400.00 LATE	99 or Limite E FEE.	d Liability	/ Corr	pany will	be					
	ANNUAL	ITY COMPAN REPORT	IY CONTRACTOR	Kath Sec	A DEPARTMENT OF STATE (atherine Harris Secretary of State			FILED				
1999 DIVISION OF CORPORATIONS								99 MAR 10 AM 10: 55				
FILING FEE Annual Report \$100.00 + \$88.75 Corporation Supplemental Fee \$ 188.75 Make Check Payable To: FLORIDA DEPARTMENT OF STATE 1. Name and Mailing Address OCUMENT # 197000001321								SEUNE DAN OF STATE TALL AHASSEE, FLORIDA				
GROBRO INVESTMENTS, L.L.C.								1a. Principal Place of Business Address				
2875 NE 191ST ST., PH 3A AVENTURA FL 33180								2937 SW 27TH AVE., SUITE 100 COCONUT GROVE FL 33133				
293	oal Place of B		ing Address 77 NE OCH Rd				Organized 724/19		3a. State	of Formation		
Suite, Apt	#, etc.	OC	pt. #, etc.		4. FEII	Number		1	Applied For			
City & Cto	do	F)	City & S	State M.	·		1	08061			Not Applicable	
Zip 2 2	377	Country	7 p	347 2 11	Courit	·	l l	of Lasi Rep 02/19		l	ate of Status Desired	
221	7. Nan	ne and Address of	Current Registered	d Agent		318)	8. Name and					
AVENTURA FL 33180 Street Address (P.O. Box Numb Street Address (P										Zip Code FL 33 Sy y submits this statement for the purpose of changing		
	red agent, an	egistered agent, or be id accept the obligat	tions			·	rmative vote of	•	1 2/3		сергие арропителс	
10. Title	M	lanaging Members/I	(NOTE: Registered A	Business Street Address				City, State and Zip Ci				
MGR	SMG V	ENTURES,	INC.	2875 1	(E 1	OIST ST	REET P				01009-004 ****188.73	
indicated o limited liab	n this annual	report is true and ac or the receiver or tri	curate and that my	signature shall h	ave the s	ame legal effect	t as if made un	07(3) (i), Elori ider oath: tha	da Statules. at Lam a mar	Hurther certificaging memb	y that the information or or manager of the in Block 10, or on an	
SIGN	ATUR	E: <u>Ş</u> وم	Das	<u>~ 5</u>	2 2∩	Grasme	<i>v</i> >					