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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

**DOCUMENT #** 1. Corporation Name

SIGNATURE:

M56593

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GRAYMAR	nevel	OMENIT	INC
GRAYMAR	UEVEL	UMENI	IIIU.

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;/O ROBERT W		C/O ROBERT W. WYM	AN		
095 S. MILITAR		3095 S. MILITARY TRAI	IL .		De Duy - Clast Boood
LAKE WORTH FL 33463		LAKE WORTH FL 3346	3	3. Date Incorporated or Qualified	3a. Date of Last Report 04/14/1995
				07/31/1987	Applied For
Principal Place	e of Business	2a. Mailing Address		4. FEt Number 59-2834898	Not Applicab
		26			\$8.75 Additional
Suite, Apt. #, 6	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
		City & State		6. Election Campaign Financing	\$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
<del></del>	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s 199.032,
Zip	25	29	30	Florida Statutes Yes  10. Name and Address of New Ro	
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New N	edistareo yacur
			81 Name		
WYMAN I	ROBERT W.		82 Street Add	ress (P.O. Box Number is Not Acceptab	ele)
3095 S. N	WILITARY TRAIL		92		
	BEACH FL		83		as 7. Ondo
			84 City		FL 85 Zip Code
Pursuant to	the provisions of Sections 607.0	502 and 607.1508, Florida Statu Jorida, Such change was authori	tes, the above-harried corporation's boa	oration submits this statement for the pur and of directors. I hereby accept the app	ointment as registered agent. I an
or registered familiar with	d agent, or both, in the state of r n, and accept the obligations of, S	ection 607.0505, Florida Statute	·S.		
familiar with	n, and accept the obligations of, S	igent and title if applicable.	IOTE: Registered Agent signature requir	and when constaling)	DATE
familiar with	n, and accept the obligations of, S	rijent and title if applicable. • • • • • • • • • • • • • • • • • • •	OTE: Rugistered Agent signature requir	and whose constitution	
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OFFICER OR DIRECTOR