

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 17, 2002 8:00 am
Secretary of State

04-23-2002 90379 010 ****61.25

DOCUMENT # N01000007972

1. Entity Name

GRANDPAWS, INC.

Principal Place of Business

121 MAJORCA AVE., STE. 300
 CORAL GABLES FL 33134

Mailing Address

121 MAJORCA AVE., STE. 300
 CORAL GABLES FL 33134

38965

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

Applied For

Available

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

NORTON, SUSAN P
 121 MAJORCA AVE., STE. 300
 CORAL GABLES FL 33134

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Susan P Norton
 Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution.

\$5.00 May Be
 Added to Fees

**Make Check Payable to
 Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	POTTER, REBECCA	
STREET ADDRESS	121 MAJORCA AVE., STE. 300	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	VD	<input type="checkbox"/> Delete
NAME	NORTON, SUSAN P	
STREET ADDRESS	121 MAJORCA AVE., STE. 300	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE	SD	<input type="checkbox"/> Delete
NAME	GOMEZ, RODOLFO	
STREET ADDRESS	121 MAJORCA AVE., STE. 300	
CITY-ST-ZIP	CORAL GABLES FL 33134	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

CR2E037 (9/01)

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 report as required by Chapter 617, 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 empowered.

SIGNATURE *Susan P Norton*
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/8/02 305-445-7801
 Date Daytime Phone #

LAW OFFICES
ALLEN, NORTON & BLUE
PROFESSIONAL ASSOCIATION

Attachment
38965

MIAMI OFFICE
SUITE 300
121 MAJORCA
CORAL GABLES, FLORIDA 33134
305/445-7801
FACSIMILE 305/442-1578

ORLANDO OFFICE
SIGNATURE PLAZA, SUITE 900
201 SOUTH ORANGE AVENUE
ORLANDO, FLORIDA 32801
407/843-0437
FACSIMILE 407/422-7368

TALLAHASSEE OFFICE
SUITE 100
906 NORTH MONROE STREET
TALLAHASSEE, FLORIDA 32303
850/561-3503
FACSIMILE 850/561-0332

TAMPA OFFICE
HYDE PARK PLAZA, SUITE 350
324 SOUTH HYDE PARK AVENUE
TAMPA, FLORIDA 33606
813/251-1210
FACSIMILE 813/253-2006

REPLY TO: Coral Gables

July 15, 2002

Florida Department of State
Division of Corporations
P. O. Box 1500
Tallahassee, Florida 32302-1500

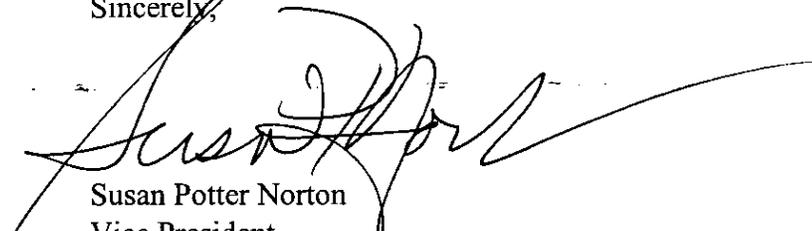
Re: Grandpaws, Inc. N01000007972

Dear Sir or Madam:

I was informed by the Division of Corporations that a FEI number is not required if there is no more than one employee. Actually there are no paid employees, this corporation was created as a non-profit making entity.

Thank you for your attention to this matter.

Sincerely,



Susan Potter Norton
Vice President

SPN/ppt
Enclosures



Attachment

38965

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State

April 29, 2002

GRANDPAWS, INC.
121 MAJORCA AVE., STE. 300
CORAL GABLES, FL 33134

Subject: GRANDPAWS, INC.

Reference Number: **N01000007972**

Please be advised, we have received your annual report/uniform business report and your check(s) totaling \$61.25; however, the report **has not been filed** and a copy is being returned for the following correction(s):

Please complete Block 4 by entering your Federal Employer Identification (FEI) number or by checking the appropriate box. If "APPLIED FOR" is preprinted in Block 4, you MUST now provide the FEI number. A Social Security number is not considered to be the same as the FEI number. For FEI number assistance, call the IRS at (800) 829-1040.

After the corrections have been made, please return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Division of Corporations at (850) 488-9000.

/jn
ANNUAL REPORTS SECTION