FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

SIGNATURE:

SIGNATURE ANATYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED May 27, 2002 8:00 am Secretary of State

941/926-1557

DOCUMENT #P0000073739					05-27-2002 90397 031 ***150.00	
GRANT'S GARDENS, INC.						
	O NOT WRITE	IN THIS SPACE			669769	
2. Principal Place of Business		3. Mailing Address				
7424 Starfish Drive Suite, Apt. #, etc.		7424 Starfish Drive Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE	
City & State		City & State			4. FEI Number	Applied For
Sarasot					65-1029274	Not Applicable \$8.75 Additional
Zip 34231	Country	Zip 34231	USA	- I	5. Certificate of Status Desired	Fee Required
			VIII.		7. Name and Address of Current Regist	ered Agent
				Name Grant S. Beatt		
DO NOT WRITE				Street Address (P.O. Box Number is Not Acceptable)		
IN THIS SPACE 7424 Starfish Drive						
				City Sarasot	.a l	Zip Code 34231
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.						
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SIGNATURË	Signature, typed or printed name of registered agent, a	and tide if applicable 1800T	E- Dooktore	d Agent signature required	when reinstating) DA	TË
	*		ore a resident and the	San Alberta Barrior B " Store or Mitallicano.	Sales	
 This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)		43. E Atter May 15.8 Amende Make Check Payal	1. Fee i diUBR i	s \$61.25	10. Election Campaign Financing Trust Fund Contribution.	\$5.00 May Be Added to Fees
11.	OFFICERS AND DIRECTOR					G SECULOR SECULOR DE
TITLE	Director //322 Grant S. Beatt					
NAME			NAME STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	7424 Starfish Drive Sarasota FL 34231		CITY ST 28 1			
TITLE NAME	Director, VP, T Danielle B. Beatt			E La Caracteria de la C		
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CITY-ST-ZIP	1			ary state of the s		
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CITY-ST-ZIP			27423 A.D.	-51,2P		AND
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NAME STREET ADDRESS			- 建造器機	STREEL ADDRESS 1		
CRTY-ST-ZIP			6.07515	ST-ZIP		
13. 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 eath; 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 11 or on an attachment with an address, with all other like empowered.						