

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**

07 FEB -8 PM 2:46  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # P01000054249

1. Entity Name  
GRID IRON ENDORSEMENTS, INC.



Principal Place of Business  
7019 FIRST AVE. SOUTH  
ST. PETERSBURG, FL 33710

Mailing Address  
150 SECOND AVE. NORTH  
SUITE 1100  
ST. PETERSBURG, FL 33701



01102007 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
36-4448564

Applied For  
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional  
Fee Required

**6. Name and Address of Current Registered Agent**

BRONSTEIN, JOEL D  
150 SECOND AVENUE NORTH  
SUITE 1100  
ST. PETERSBURG, FL 33701

**DO NOT WRITE  
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

\$5.00 May Be  
Added to Fees

700088061877  
02/13/07--01001--012 \*\*150.00

**10. OFFICERS AND DIRECTORS**

TITLE PT  
NAME ALSTOTT, MICHAEL  
STREET ADDRESS 7800 9TH AVENUE SOUTH  
CITY-ST-ZIP SAINT PETERSBURG, FL 33707

TITLE VPS  
NAME HELIGMAN, MARK  
STREET ADDRESS 222 S. CENTRAL STE. 1008  
CITY-ST-ZIP SAINT LOUIS, MO 63105

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #