2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P0100071036 1. Entity Name GRAND-MIDI U.S.A. CORPORATION					FILED 02 007 -7 PH 2: 50			
Principal Place of Business 1631 LEE ST 7772 TATUM Mailing Address 1631 LEE ST 7772 TATUM A 1631 LEE ST. 7772 TATUM A 1631 LE					SECRETAL OF STATE FOR WELL A # SEE, FLORING L F C 33141			
2. Principal P	Place of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			DO NOT WRITE IN THIS SPACE			
City & State		City & State 4.		4. F	FEI Number Applied For Not Applicable			
Zip	Country	Zip	Country		Certificate of Status Desired	\$8.75 Add	ditional	
	6. Name and Address of Current Re	egistered Agent		7. N	Name and Address of New Registere		-	
Name -								
PORDEA, GREGOIRE 7772 TATUM WATARWAY Street Address (P.O. Box Number is Not Acceptable) HOLLYWOOD FL 33020 HISCU BEACH FC 33/4/ 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.							le	
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required 9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back) FILE NOW!!! FEE IS \$150.00 After May 1, 2002 Fee will be \$550.00 Make Check Payable to Department of State				required when re	instating) DATE 10. Election Campaign Financing	\$5.0	00 May Be	
11.	OFFICERS AND DI		12.		L DITIONS/CHANGES TO OFFICERS AN	NO DIRECTOR:	S IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PSTD PORDEA CRECOIDE	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	70	100008302 -10/10/02(****150.00		Addition	
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	☐ Addition	
TITLE Name Street address City-St-Zip		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Change	Addition	
of the corp	ertify that the information supplied with thi on this report or supplemental report is tru poration or the receiver or trustee empowe or on an attachment with an accress, with	red to execute this report as						

SIGNATURE:

October 1st 2002

Division of Corporations Uniform Business Report Filings P.O. Box 1500 Tallahassee, FL 32302-1500

RE: Void Late Fee Grand-Midi USA Corporation P01000071036

Dear Representative:

With all your respect I am sending this letter as a request to **Void penalty** for my Late Business File fee, been new in this country with no knowledge about rules and regulations and have my address been changed, **I didn't received this Business Report on time**, the Accountant who made the incorporation didn't advice me about this. Since I don't have any revenue from this business and I had a hardship situation I was looking into the option to make a Business Dissolution, this is why I am in dire of your assistance and accept my apologies and the \$150.00 file fee.

Sincerely,

Gregoire Pordea

If you have any question please don't hesitate to call me at (786) 486-8829

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