2005 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P01000084813

Entity Name: GRUMAX, INC.

City-St-Zip:

SOUTH MIAMI, FL 33143

FILED Oct 20, 2005 Secretary of State

Entity Nar	me: GRUMAX	, INC.			
Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	62 AVE 2ND FI IAMI, FL 3314				
Current Mailing Address:			New Mailing Address:		
	S2 AVE 2ND FI IAMI, FL 3314				
FEI Number:	: 65-1137879	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
SUITE 201	ENDALL DR				
The above in the State	named entity s e of Florida.	submits this statement for the p	ourpose of changing its registered	d office or registered agent, or both,	
SIGNATUR	RE: ELLIOTT	GELFAND			
	Electror	ic Signature of Registered Age	ent	Date	
		3(2)(b), F.S., the corporation did no g Trust Fund Contribution ().	t receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () BAUGH, PETER 7701 SW 62 AV SOUTH MIAMI,	/E 2ND FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () ROEDENBECK 7701 SW 62 AV SOUTH MIAMI,	/E 2ND FL	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	D () ROSAS, JESUS 7701 SW 62 AV		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

City-St-Zip:

SIGNATURE: PETER BAUGH D 10/20/2005