

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 03, 2003 8:00 am
Secretary of State

03-03-2003 90863 030 ***150.00

DOCUMENT # P02000005243

1. Entity Name
GRANDE REALTY, INC.



Principal Place of Business
**COMPSON FINANCIAL CENTER
STE 302 980 N FEDERAL HWY
BOCA RATON FL 33432-2704**

Mailing Address
**COMPSON FINANCIAL CENTER
STE 302 980 N FEDERAL HWY
BOCA RATON FL 33432-2704**

70024271



2. Principal Place of Business
3626 S. OCEAN BLVD

3. Mailing Address
3626 S. OCEAN BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

☒ CHECK HERE IF MAKING CHANGES

City & State
HIGHLAND BEACH

City & State
HIGHLAND BEACH

4. FEI Number
01-0581579

Applied For
Not Applicable

Zip
33487 Country
PAUM BEACH

Zip
33487 Country
PAUM BEACH

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**MALLINGER, MARTIN R
COMPSON FINANCIAL CENTER
STE 302 980 N FEDERAL HWY
BOCA RATON FL 33432-2704**

Name
ARTHUR KWIAT

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

3626 S. OCEAN BLVD

City
HIGHLAND BEACH FL Zip Code
33487

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 *Arthur Kwiat*

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, 2003 Fee will be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DP
KWIAT, ARTHUR J
3626 S OCEAN BLVD CENTER
HIGHLAND BCH FL 33487** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**DST
KWIAT, PAULETTE
3626 S OCEAN BLVD CENTER
HIGHLAND BCH FL 33487** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
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CITY-ST-ZIP
☐ Delete

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CITY-ST-ZIP
☐ Change ☐ Addition

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 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: *Arthur Kwiat* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

02-28-03

Date

Daytime Phone #

CR2E034 (10/02)