2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000056614

Entity Name: GRANDMA INC

City-St-Zip:

FT LAUDERDALE, FL 33308

FILED Feb 05, 2009 Secretary of State

| Littly Na | IIIC. GRANDI | VIA INC. | | | |
|-------------------------------------------------------------------------------------|----------------------------------------------------|--------------------------------|-----------------------------------------------------------------------------------|----------------------------------------------|--|
| Current Principal Place of Business: | | | New Principal P | New Principal Place of Business: | |
| | DMMERCIAL B ERDALE, FL 3 | | | | |
| Current Mailing Address: | | | New Mailing Ad | New Mailing Address: | |
| % SOUTH BROWARD ACCTNG SVCS 5599 S UNIVERSITY DRIVE ~ STE 306 DAVIE, FL 33328 | | | SOUTH BROWARD ACCTNG SVCS 5599 S UNIVERSITY DRIVE ~ STE 306 DAVIE, FL 33328 | | |
| FEI Number | : 14-1884580 | FEI Number Applied For () | FEI Number Not Applicable (|) Certificate of Status Desired () | |
| Name and Address of Current Registered Agent: | | | Name and Addr | Name and Address of New Registered Agent: | |
| DAVIE, FL | NVERSITY DR 33328 US | | purpose of changing its regi | stered office or registered agent, or both, | |
| SIGNATUI | | | | | |
| 0.0 | | nic Signature of Registered Ag | ent | Date | |
| Election Ca | mpaign Financin | g Trust Fund Contribution (). | | | |
| OFFICERS AND DIRECTORS: | | | ADDITIONS/CH | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: | |
| Title: Name: Address: City-St-Zip: | P (CORTEO, JOE 6327 NW 79 W PARKLAND, FI | /AY | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: Address: City-St-Zip: | D (LOPEZ, WALT 9483 BURLING BOCA RATON, | STON PLACE | Title: Name: Address: City-St-Zip: | ()Change ()Addition | |
| Title: Name: | D (HERNANDEZ, 1 | | Title: Name: | () Change () Addition | |

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JOE CORTEO P 02/05/2009