

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 90417 048 \*\*\*150.00

**DOCUMENT # P03000068855**

1. Entity Name  
**GRAND FLORIDA INTERNATIONAL, INC.**



Principal Place of Business  
**4995 NW 72ND AVENUE  
SUITE 205-D  
MIAMI, FL 33183**

Mailing Address  
**4995 NW 72ND AVENUE  
SUITE 205-D  
MIAMI, FL 33183**

**34063703**

2. Principal Place of Business  
**6250 N ANDREWS AVE  
Suite, Apt. #, etc.  
SUITE 125-A**

3. Mailing Address  
**6250 N ANDREWS AVE  
Suite, Apt. #, etc.  
SUITE 125-A**

City & State  
**FT LAUDERDALE FL  
Zip  
33311**

City & State  
**FT. LAUDERDALE FL  
Zip  
33311**

03152004 Chg-P CR2E034 (10/03)

4. FEI Number **92-0194320**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**MALDONADO, JOSE I  
4995 NW 72 AVENUE, SUITE 205-D  
MIAMI, FL 33183**

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
**6250 N ANDREWS AVE  
SUITE 125-A  
City FT. LAUDERDALE FL Zip Code 33311**

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 **JOSE I. MALDONADO, PRESIDENT** **4/20/04**  
(NOTE: Registered Agent signature required when reinstating) DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE **VD** ☐ Delete  
NAME **DE CACERES, PEDRO NUNEZ**  
STREET ADDRESS **7928 MARBELLA COURT**  
CITY-ST-ZIP **ORLANDO, FL 32836**

TITLE **PD** ☐ Delete  
NAME **MALDONADO, JOSE I**  
STREET ADDRESS **4995 NW 72 AVE., SUITE 205-D**  
CITY-ST-ZIP **MIAMI, FL 33183**

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

TITLE ☒ Change ☐ Addition  
NAME  
STREET ADDRESS **6250 N ANDREWS AVE, SUITE 125-A**  
CITY-ST-ZIP **FT. LAUDERDALE FL 33311**

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

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
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CITY-ST-ZIP

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

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: **JOSE I. MALDONADO, PRESIDENT** **4/20/04** **(954) 821-2321**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #