

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000083832

FILED  
Nov 22, 2004  
Secretary of State

Entity Name: GRACE REALTY GROUP, INC.

## Current Principal Place of Business:

10086 GRIFFIN RD.  
FORT LAUDERDALE, FL 33328

## New Principal Place of Business:

10086 GRIFFIN RD.  
COOPER CITY, FL 33328

## Current Mailing Address:

3800 SW 142 AVE  
COOPER CITY, FL 33330

## New Mailing Address:

10086 GRIFFIN ROAD  
COOPER CITY, FL 33328

FEI Number: 54-2119648

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

WEINER, RICHARD M ESQUIRE  
3333 N UNIVERSITY DR STE A  
DAVIE, FL 33024 US

## Name and Address of New Registered Agent:

WEINER, RICHARD M ESQUIRE  
3333 N UNIVERSITY DRIVE  
SUITE A  
DAVIE, FL 33024 US

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.

SIGNATURE:

11/22/2004

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: MITCHELL, NORMA G  
Address: 3800 SW 142 AVE  
City-St-Zip: DAVIE, FL 33330

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition  
Name: MITCHELL, NORMA G  
Address: 10086 GRIFFIN ROAD  
City-St-Zip: COOPER CITY, FL 33328

Title: DVP ( ) Change (X) Addition  
Name: MITCHELL, DOUGLAS L  
Address: 10086 GRIFFIN ROAD  
City-St-Zip: COOPER CITY, FL 33328

Title: S ( ) Change (X) Addition  
Name: MITCHELL, JACOB D  
Address: 2459 NW 73 AVENUE  
City-St-Zip: SUNRISE, FL 33313

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.

SIGNATURE: NORMA G. MITCHELL

DP

11/22/2004

Electronic Signature of Signing Officer or Director

Date