

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000045053

FILED  
Mar 09, 2006  
Secretary of State

Entity Name: INVERSIONES GRANTHON INC.

## Current Principal Place of Business:

20201 N.E. 29 C.T.  
NO. D-110  
AVENTURA, FL 33180

## New Principal Place of Business:

## Current Mailing Address:

20201 N.E. 29 C.T.  
NO. D-110  
AVENTURA, FL 33180

## New Mailing Address:

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

GUANIRA, NORMA G  
20201 N.E. 29 C.T.  
NO. D-110  
AVENTURA, FL 3318 US

## Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: P ( ) Delete  
Name: GRANTHON, NORMA  
Address: 20201 N.E. 29 C.T. NO. D-110  
City-St-Zip: AVENTURA, FL 3318

Title: V ( ) Delete  
Name: GRANTHON, NORMA  
Address: 20201 N.E. 29 C.T. NO. D-110  
City-St-Zip: AVENTURA, FL 3318

Title: T ( ) Delete  
Name: GUANIRA, NORMA  
Address: 20201 N.E. 29 C.T. NO. D-110  
City-St-Zip: AVENTURA, FL 3318

Title: S ( ) Delete  
Name: CHAMOCHUMBI, ROSA  
Address: 651 HARTH DR.  
City-St-Zip: WEST PALM BEACH, FL 33415

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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.

SIGNATURE: NORMA GRANTHON

P

03/09/2006

Electronic Signature of Signing Officer or Director

Date