

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