2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT # P04000146926

1. Entity Name

GRG STRUCTURES GROUP, INC



FILED Jan 24, 2007 08:00 A **Secretary of State**

Principal Place of Business

7130 S ORANGE BLOSSOM TRAIL

124

ORLANDO, FL 32809

Mailing Address

7130 S ORANGE BLOSSOM TRAIL

ORLANDO, FL 32809



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01032007 No Chg-P CR2E034 (11/05) Applied For

4. FEI Number 20-1784637

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

L.L. PROFESSIONAL SERVICES, INC. 7661 CURRENCY DRIVE ORLANDO, FL 32809

SIGNATURE A

SIGNATURE:

DO NOT WRITE IN THIS SPACE

SIGNATURE Signature typed or printer native of excistered agent and title if applicable. (NOTE: Registered Agent signature required when retristating) DATE									
	E NOW!!! FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	Election Campaign Financ Trust Fund Contribution.	cing 🗆	\$5.00 May Be Added to Fees					
10.	OFFICERS AND DIREC								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUZMAN, JOSE A 11625 KENLEY CR ORLANDO, FL 32824				U00000600416 01/26/07-80008-016 150.00				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP RODRIGUEZ, CARLOS E 9342 EDENSHIRE CR ORLANDO, FL 32836				" " -				
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GAVIRIA, GERMAN A 6636 DOUBLETRACE LANE ORLANDO, FL 32819			IN T	THIS SPACE				
TITLE NAME STREET ADDRESS CITY-ST-ZIP									
TITLE NAME STREET ADDRESS CITY-ST-ZIP					and the CL of Alle				
12. I hereby certify that the information supplied with this tilling does not qualify for the exemptions contained 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 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 be 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.									

NAME OF SIGNING OFFICER OR DIRECTOR

8. The above named entry symmits 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, or both, in the State of Florida.