

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 20, 2008 8:00 am
Secretary of State

02-20-2008 90003 042 ***150.00

DOCUMENT # P04000146926					
1. Entity Name GRG STRUCTURES GROUP, INC					
Principal Place of Business 7130 S ORANGE BLOSSOM TRAIL 124 ORLANDO, FL 32809			Mailing Address 7130 S ORANGE BLOSSOM TRAIL 124 ORLANDO, FL 32809		
2. Principal Place of Business - No P.O. Box # 1046 Citrus Street		3. Mailing Address 1046 Citrus Street			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Orlando, FL		City & State Orlando, FL		4. FEI Number 20-1784637	
Zip 32805		Country U.S.A.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent L.L. PROFESSIONAL SERVICES, INC. 7661 CURRENCY DRIVE ORLANDO, FL 32809			7. Name and Address of New Registered Agent Name: L.L. Professional Services, Inc. Street Address (P.O. Box Number is Not Acceptable): 6900 S. Orange Blossom Tr. Ste 400 City: Orlando FL Zip Code: 32809		
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: <u>Aixa Lopez</u> 02/13/2008 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <input type="checkbox"/> Delete GUZMAN, JOSE A 11625 KENLEY CR ORLANDO, FL 32824		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input type="checkbox"/> Delete RODRIGUEZ, CARLOS E 9342 EDENSHIRE CR ORLANDO, FL 32836		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <input type="checkbox"/> Delete RODRIGUEZ, CARLOS E 9342 EDENSHIRE CR ORLANDO, FL 32836		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <input checked="" type="checkbox"/> Delete GAVIRIA, GERMAN A 6636 DOUBLETTRACE LANE ORLANDO, FL 32819		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secretary German Gavrira <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5474 Gemgold CT Windermere, FL 34786	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
12. I hereby certify that the information supplied with this filing 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 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: <u>Jose A. Guzman - President</u> 02/13/08 (407) 858-5444 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					