

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000037627

FILED
Feb 06, 2007
Secretary of State

Entity Name: GRL INVESTMENTS HOLDING, CORP.

Current Principal Place of Business:

351 NW LEJEUNE RD SUITE 103
MIAMI, FL 33126

New Principal Place of Business:

Current Mailing Address:

351 NW LEJEUNE RD SUITE 103
MIAMI, FL 33126

New Mailing Address:

FEI Number: 59-3798402 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEON, GUSTAVO G
351 NW LEJEUNE RD SUITE 103
MIAMI, FL 33126 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: D () Delete
Name: LEON, GUSTAVO G
Address: 351 NW LEJEUNE RD SUITE 103
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: RABASSA, CARLA
Address: 351 NW LEJEUNE RD SUITE 103
City-St-Zip: MIAMI, FL 33126

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DR (X) Change () Addition
Name: LEON, GUSTAVO G
Address: 351 NW LEJEUNE RD SUITE 103
City-St-Zip: MIAMI, FL 33126

Title: DR (X) Change () Addition
Name: RABASSA, CARLA
Address: 351 NW LEJEUNE RD SUITE 103
City-St-Zip: MIAMI, FL 33126

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: CARLA RABASSA

DR

02/06/2007

_____ Electronic Signature of Signing Officer or Director

_____ Date