2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000116769

Entity Name: GREY WOLF, INC

FILED Jul 13, 2008 Secretary of State

Littly Nan	ile. GREI WC	DEF, INC.					
Current Principal Place of Business:				New Principal Pl	New Principal Place of Business:		
3245 NE 184TH ST APT 13113 NORTH MIAMI BEACH, FL 33160 US					1554 SOUTH FEDERAL HIGHWAY DELRAY BEACH, FL 33483 US		
Current Mailing Address:				New Mailing Add	New Mailing Address:		
3245 NE 184TH ST APT 13113 NORTH MIAMI BEACH, FL 33160 US				APARTMENT 131	3245 NORTHEAST 184TH STREET APARTMENT 13113 AVENTURA, FL 33160 US		
FEI Number:	77-0702604	FEI Number	Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()		
Name and Address of Current Registered Agent:				Name and Addres	Name and Address of New Registered Agent:		
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 32301 US				3245 NORTHEAS SUITE 13113	BYNUM, KEN L OWNER 3245 NORTHEAST 184TH STREET SUITE 13113 AVENTURA, FL 33160 US		
The above in the State		ubmits this s	tatement for the pur	pose of changing its regis	tered office or registered agent, or both,		
SIGNATURE: KEN BYNUM					07/13/2008		
	Electroni	ic Signature	of Registered Agent		Date		
	e with s. 607.193			eceive the prior notice.			
OFFICERS AND DIRECTORS:				ADDITIONS/CHA	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	D () BYNUM, KEN 3245 NE 184TH NORTH MIAMI B			Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (X) BYNUM, TRENA 3245 NE 184TH NORTH MIAMI B	ST APT 13113		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	D (X) SHEFFIELD, FR 3245 NE 184TH NORTH MIAMI B	ST APT 13113		Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name:	D (X) SHIBATA, NAMI	Delete		Title: Name:	() Change () Addition		

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

Address:

City-St-Zip:

SIGNATURE: KEN BYNUM D 07/13/2008

3245 NE 184TH ST APT 13113

NORTH MIAMI BEACH, FL 33160 US

Address:

City-St-Zip: