## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**FILED** PROFIT FLORIDA DEPARTMENT OF STATE Jan 22 1998 8:00am CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT #
1. Corporation Name P20338 (0)GRANUTEC, INC. Principal Place of Business Mailing Address 4409 NW AIRPORT DRIVE 4409 NW AIRPORT DRIVE WILSON NC 27893 WILSON NC 27893 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 08/03/1988 2. Principal Place of Business 2a. Mailing Address 4. FELNumber Applied For 56-1477373 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 Personal Property Tax due June 30. 30 ☐ Yes 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent 81 CASS, LEONARD J. 700 SOUTHEAST THIRD AVENUE 82 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33316 83 Zip Code 85 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

ANDA H. PIHAMA I - 798 INDA SIGNATURE name of registered agent and title if applicable OFFICERS AND DIRECTORS 12 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE DELETE 1.1 TITLE Change Addition CARRIERO, JIM NAME 1.2 NAME 2543 AIRPORT DR. STREET ADDRESS 1.3 STREET ADDRESS HAMBURG NY CITY-ST-ZIP 1.4 CITY - ST - ZIP ☐ DELETE TITLE 2.1 TITLE Change Addition MCCORMACK, ED NAME 2.2 NAME 30 NABLY CT. STREET ADDRESS 2.3 STREET ADDRESS SCARBOROUGH ON CITY - ST - ZIF 2. 4 CITY-ST-ZIP DELETE TITLE 31 TITLE Change Addition PITTMAN, LINDA NAME 3.2 NAME 2116 HERMITAGE RD. STREET ADDRESS 3.3 STREET ADDRESS WILSON NO CITY-ST-ZIP 3.4. CITY - ST-ZIP \_\_\_ DELETE 4.1 TITLE Change Addition FEENEY, JOHN NAME 4. 2 NAME LITTLE JOHN DR. STREET ADDRESS 4.3 STREET ADDRESS WILSON NO CITY-ST-ZIP 4.4 CITY - ST- ZIP DELETE Change TITLE 5.1 TITLE ☐ Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-7IP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

☐ Change

Addition

**CR2E034**