


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

FILED

Apr 21 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 26905 1. Corporation Name GRADES, INC.					
Principal Place of Business		Mailing Address			
7220 SW 5th STREET		PLANTATION, FL 33317			
2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26 7220 SW 5th STREET		11/15/89	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		3a. Date of Last Report	
22		27		1996	
City & State		City & State		4. FEI Number	
23		28 PLANTATION, FL		65-0136714	
Zip		Zip		Applied For	
24		29 33317		Not Applicable	
Country		Country		5. Certificate of Status Desired	
25		30 USA		<input type="checkbox"/> \$8.75 Additional Fee Required	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	
ALAN L. GOLDENBERG				81 Name	
7220 SW 5th STREET				82 Street Address (P.O. Box Number is Not Acceptable)	
PLANTATION, FL 33317				83	
				84 City	
				FL	
				85 Zip Code	
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					
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent's signature required when re-registering) DATE					
12. OFFICERS AND DIRECTORS					
1.1 TITLE					
1.2 NAME					
1.3 STREET ADDRESS					
1.4 CITY - ST - ZIP					
2.1 TITLE					
2.2 NAME					
2.3 STREET ADDRESS					
2.4 CITY - ST - ZIP					
3.1 TITLE					
3.2 NAME					
3.3 STREET ADDRESS					
3.4 CITY - ST - ZIP					
4.1 TITLE					
4.2 NAME					
4.3 STREET ADDRESS					
4.4 CITY - ST - ZIP					
5.1 TITLE					
5.2 NAME					
5.3 STREET ADDRESS					
5.4 CITY - ST - ZIP					
6.1 TITLE					
6.2 NAME					
6.3 STREET ADDRESS					
6.4 CITY - ST - ZIP					
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
Change Addition					
400002150194					
-04/22/97--01020--051					
***165.00					
14. I do hereby certify that the information supplied with this filing 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.					
SIGNATURE: Alan L. Goldenberg					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					

CR2E034 (9/96)

4/14/97 (954) 587-5755