FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation	MENT # P93000 GRIND, INC.	032653 (6)			
UNICI	ariine, ino.				
Principal Place	of Business	Maling Address			88 441 86180 5111 0 11 010 8110 1 8 14 0 0 4111 1 03 1
900 N. FEDERAL HWY. UNIT B FORT LAUDERDALE FL 33304		900 N. FEDERAL HWY. UNIT B FORT LAUDERDALE FL 33304			
TONT CAUDE	NOVEE TE SOUP	FORT ENOUGHDALE PE S		3. Date Incorporated or Qualified	3a. Date of Last Report
• Bi		a Maria Addina		05/03/1993 4. FEI Number	04/24/1995
2. Principal Pla 21	· · · · · · · · · · · · · · · · · · ·	2a. Mailing Address 26		65-0408928	Applied For Not Applicable
Suite, Apt. #		Suite, Apt. #, etc.			\$8.75 Additional
22		27		5. Certif-cate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability far i	
24	25		30		□ No
	9. Name and Address of Current R	egistereo Agent	81 Name	10. Name and Address of New R	egistered Agent
				RANK KUBIN	0
	GRETCHEN		82 Street Addr	ress (P.O. Box Number is Not Acceptate	IL ALLAY MALE &
	EDERAL HWY.		83	OU TO PEDERAL	TIEHWAT WATE
UNIT-B-	HUDERDALE FL 33304~				
∽ rom ∟	ODEHDALE PL 33304~		84 City	ET LAUDERDALE	FI 85 Zip Code
11. Pursuant to	the provisions of Section 607.0502 an	ວ່ 607.1508. Florida Statutes,	the above-named corpor	ation submits this statement for the pur	pose of changing its registered office
or registere familiar witt	ed agent or bolk, in the State of Elorida-	Such change was authorized 607,0705, Florida Statutes.	by the corporation's boar	rd of directors. Thereby accept the app	bintment as registered agent. I am
	I Tall Vila	/	Franklisting		4/10/96
SIGNATURE _	Signative Hysekt or printed natios of register diages have	Shirit arginizaria. (NOM)	Flogistated Agent Signature to plus	divition relations	
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OFF	
TITLE	PVST	DELETE	1 1 TIFLE		☐ Change ☐ Addition
NAME	RUBINO, FRANK		1.2 NAME		
STREET ADDRESS	900 N. FEDERAL HIGHWAY		1.3 STREET ADDRESS		
CITY - ST - ZIP	FORT LAUDERDALE FL 33304	FT profit	14 CITY - ST 7-P		El Change El Addition
TITLE	D D	☐ DEFELE	2 1 11'11		☐ Change ☐ Addition
NAME	RUBINO, FRANK		22 NAME		
STREET ADDRESS	900 N. FEDERAL HIGHWAY		2.3 STREET ADDRESS		
CITY-ST-2IP TITLE	FORT LAUDERDALE FL 33304	[] DELETE	24 CFY - ST - ZIP 3 1 HILE		☐ Change ☐ Addition
NAME		Detere	3 2 NAME		
STREET ADDRESS			33 STREET ADDRESS		
CITY-ST-ZIP			3.4 CITY - \$1 - ZIP		
TITLE		DELETE	4 1 TILE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADORESS		•
CITY-ST-ZIP			4.4 City - St - ZIP		
TITLE		DELETE	5 1 TILE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY - S1 - ZIP		
THTLE		☐ DELETE	€ 1 T TLE		Change Addition
NAME			6 2 NAME		
STREET ACORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP		. ,	6.4 C(TY+ST+Z(P)		
14. I do hereo	y certify that the information supplied witi the information indicated on this annual	n this fling is voluntarily furnish	ned and does not qualify the northis true and accura	for the exemption stated in Section 1.19	.07(3)(k), Florida Statutes. I further same legal effect as if made under
oath; that I	am an officer or director of the corporat Block 12 of Block 11 if changing, or on	i) in or the receiver or trustee ϵ	empowered to execute this	is report as required by Chapter 607, F	orida Statutes, and that my name

SIGNATURE:

MING OFFICE PH DIRECTOR PUSING