

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

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **P93000036862 (9)**

1. Corporation Name

GROVE DEVELOPMENT CORPORATION



Principal Place of Business

**5455 S.W. EIGHTH STREET
STE. 205
MIAMI FL 33134**

Mailing Address

**5455 S.W. EIGHTH STREET
STE. 205
MIAMI FL 33134**

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip **25** Country

2a. Mailing Address

26 **P.O. Box 330044**

Suite, Apt. #, etc.

27 City & State
28 **Coconut Grove, Florida**

29 Zip **30** Country
33233 **USA**

3. Date Incorporated or Qualified

05/18/1993

3a. Date of Last Report

05/01/1995

4. FEI Number

65-0418163

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 193.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**MARTINI, GREGORY T
2655 LEJEUNE ROAD
STE. 1101
CORAL GABLES FL**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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 new registered agent (if applicable)

NOTE: Registered Agent signature and printed name required

DATE

12. OFFICERS AND DIRECTORS

1 ☐ DELETE
TITLE **D**
NAME **BOLOOKI, HAMID**
STREET ADDRESS **5455 S.W. EIGHTH STREET STE. 205**
CITY-ST-ZIP **MIAMI FL 33134**

2 ☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3 ☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4 ☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5 ☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6 ☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2 ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

3 ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

4 ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

5 ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6 ☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

**200001829382
-05/20/96--01047--034**

*****200.00**

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **Hamid Bolooki**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96
Date

(305) 441-0892
Telephone Number

CR2E034 (12/95)

125
5/1/96