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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## 1999 DOCUMENT # P93000036862 1. Corporation Name

**GROVE DEVELOPMENT CORPORATION** 

Principal Place of Business	Mailing Address
5455 S.W. EIGHTM STREET STE. 205 MIAMI FL 33134	P.O. BOX 330044 COCONUT GROVE FL 33233

FILED Apr 16, 1999 8:00 am Secretary of State

04-16-1999 90034 034 \*\*\*150.00



Principal Place	e of Business	Mailing Address	S							
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MIAMI FL 33134	1						DO NOT WRIT	E IN THIS S	SPACE	
						3, Date Incorpor				)
						05/18/1993	3			
2. Principal P	lace of Business	2a. Mailing Add	ress			4. FEI Number				Applied For
21		26				65-041816	3			Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #	t, etc.			5. Certifcate of S			\$8.75	Additional
22		27				5, Certificate of S	Status Desired	اليا	Fee	Required
City & Stat	e	City & State	9 75 7	÷	· · · · · · · · · · · · · · · · · · ·	6. Election Camp	paign Financing		\$5.0	May Be
23		28				Trust Fund Co	ontribution		Adde	d to Fees
Zip	Country	Zip		Country	-	8. This corporati	on owes the curre	ent year Intai	ngible	9.
24	25	29	30			Personal Prop			☐ Yes	□No
	9. Name and Address of Curren					10. Name and Ad	ddress of New R	egistered A	gent	
				81	Name					
MAR	tini, gregory t			82			7 A7-4 A - T-A-	614)		
2655	LEJEUNE ROAD				Street A	Address (P.O. Box Numb	er is Not Accepta	DIO)		1
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	AL GABLES FL			[				· _		
00				84	City		<del></del> .	FL	85 Zi	p Code
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11. Pursuant	to the provisions of Sections 607.050; egistered agent, or both, in the State	of Florida. Such char	nda Statutes, tr	ne above	e-named c	corporation submits this s ration's board of director	statement for the s. I hereby accep	t the appoint	manging Iment as	registered
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14. I 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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)