

2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000049728

Entity Name: GRAND PARTNERS, INC.

FILED
Mar 07, 2011
Secretary of State

Current Principal Place of Business:

C/O KOZYAK TROPIN & THROCKMORTON, P.A.
2525 PONCE DE LEON BLVD, 9TH FL
CORAL GABLES, FL 33134 US

New Principal Place of Business:

C/O KOZYAK TROPIN & THROCKMORTON, P.A.
2525 PONCE DE LEON, 9TH FL
CORAL GABLES, FL 33134 US

Current Mailing Address:

C/O KOZYAK TROPIN & THROCKMORTON, P.A.
2525 PONCE DE LEON BLVD, 9TH FL
CORAL GABLES, FL 33134 US

New Mailing Address:

C/O KOZYAK TROPIN & THROCKMORTON, P.A.
2525 PONCE DE LEON, 9TH FL
CORAL GABLES, FL 33134 US

FEI Number: 65-0421596

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KOZYAK TROPIN & THROCKMORTON, P.A.
2525 PONCE DE LEON BLVD., 9TH FL
CORAL GABLES, FL 33134 US

Name and Address of New Registered Agent:

KOZYAK TROPIN & THROCKMORTON, P.A.
2525 PONCE DE LEON, 9TH FL
CORAL GABLES, FL 33134 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent

03/07/2011

Date

OFFICERS AND DIRECTORS:

Title: R
Name: KOZYAK, JOHN, RECEIVER
Address: 2525 PONCE DE LEON, 9TH FL
City-St-Zip: CORAL GABLES, FL 33134

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: /S/ JOHN W. KOZYAK, AS RECEIVER

R

03/07/2011

Electronic Signature of Signing Officer or Director

Date