

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P93000061351

FILED
Jan 14, 2004
Secretary of State

Entity Name: GROVE ISLE INVESTMENTS, INC.

Current Principal Place of Business:

1870 SOUTH BAYSHORE DRIVE
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

1870 SOUTH BAYSHORE DRIVE
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 65-0434451 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTHSTEIN, LAWRENCE
1870 SOUTH BAYSHORE DRIVE
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

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

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: CD () Delete
Name: WEINER, MAURICE
Address: 1870 SOUTH BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: DPS () Delete
Name: ROTHSTEIN, LAWRENCE I
Address: 1870 SOUTH BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: VAS () Delete
Name: CAMAROTTI, CARLOS
Address: 1870 SOUTH BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: CD (X) Change () Addition
Name: WIENER, MAURICE
Address: 1870 SOUTH BAYSHORE DRIVE
City-St-Zip: COCONUT GROVE, FL 33133

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARLOS CAMAROTTI

VAS

01/14/2004

Electronic Signature of Signing Officer or Director

_____ Date