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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9300063604 (1)

GRIP DEVELOPMENT, INC.

Principal Place of Business

Mailing Address

FILED Jan 20 1998 8:00am Secretary of State



2672 TIMBERCREEK CIRCLE 2672 TIMBERGREEK CIRCLE BOCA RATON FL \$3431 **BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualified 09/07/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 Not Applicable 65-0448185 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired \Box Fee Required 22 27 City & State City & State Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PARDO, JEFFREY J 257 EAST RIVO ALTO DRIVE 82 Street Address (P.O. Box Number is Not Acceptable) **SUITE 210** 83 MIAMI BEACH FL 33139 84 City 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 registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE D DELETE 1.1 TITLE ☐ Change ■ Addition RUBIN, GARY 1.2 NAME NAME 2672 TIMBERCREEK CIRCLE 1.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE D 2.1 TITLE PARDO, IRA NAME 2.2 NAME 2672 TIMBERCREEK CIRCLE 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ■ Addition PARDO, JEFFREY NAME 3.2 NAME 257 EAST RIVO ALTO DRIVE STREET ADDRESS 3.3 STREET ADDRESS MIAMI BEACH FL CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Addition Change TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE □ DELETE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME 63 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP

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 suppliemental 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 charbord, or on an attachment with an address.

SIGNATURE:

August 19198

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