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 #

P93000077571 (6)

FILED May 18 1998 8:00am Secretary of State

GROMO	DUV INC.				
Principal Place	e of Business	Mailing Address			
2760 E OAKLAND PARK BLVD 2760 E OAKLAND PARK BI			RK BLVD		
FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306					
					DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
- D					11/04/1993
2. Principal Place of Business		2a, Mailing Address			4. FEI Number Applied For
Suite, Apt. #, etc		Suite. Apt. #, etc.			65-0450022 Not Applicable
¬ '''		27			5. Certificate of Status Desired \$8.75 Additional Fee Regulied
City & State		City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip Country		7ip Country		y	8. This corporation owes or has paid the current year Intangible
4	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registered Agent
	omouv, alexander		.81	Name	KLAUDIA GELMAN
3621 LIME HILL RD			82	Street A	ddress (P.O. Box Number is Not Acceptable)
اها ء	JDERHILL FL 33319			3	34/6 WILLOW Wood KOAD
			83	<u>'</u>]	LAUderhill
			84	City	os 7in Code
ک				"	FL 193319
SIGNATURE	Belacke UM Sorature, tysed or project nature of registered ag	LLUA est and ble et applicable (6	NOTE: Registered Ag		corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered squired when reinstating)
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VANALIDOLENAVA MINIA	DELETE	1 1 TITLE		COUNTRY COLUMN Change Addition
NAME	YAKUBOUFKAYA, NINA 3621 LIME HILL RD	/	1.2 NAME	ſ	KLAVOIA GELMAN PRIAGE ADDITION 3410 WILLOW WORD PORT
STREET ADDRESS	LAUDERHILL FL 33319			T ADDRESS	LAUdouhill, Florion 33319
CITY-ST-ZIP	DAUDENHILL FL 33319	DELETE	1.4 CITY - 2.1 TITLE	ST-ZIP	☐ Change ☐ Addition
TITLE				1	Change C Addition
NAME STREET ADDRESSO			2.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP TITLE		DELETE	2. 4 City - 3.1 Title	51-ZIP	Change Addition
NAME			3.2 NAME		
STREET ADDRESS				T ADDRESS	
CITY-ST-ZIP			3.4. CITY-		
TITLE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		·
STREET ADDRESS			4.3 STREE	1 ADDRESS	
CITY-ST-ZIP			4.4 CI1Y -	ST-ZIP	
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME	İ	and the state of t
STREET ADDRESS			5.3 STREE	T ADDRESS	•
CITY-ST-ZIP			5 4 CITY -	ST-ZIP	<u> </u>
TITLE		DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			63 STAFE	T ADDRESS	ł
CITY-ST-ZIP			6.4 City -		
14. I hereby o	certify that the information supplied v	with this filing does not qualify	y for the exemp	otion 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 it made under oath, that I am at officer or director of the corporation in 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 it changed or on an attachment with an address.