SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000007924 (1)

GRANDPEX, INC.

FILED
Oct 07 1998 8:00am
Secretary of State

Principal Plac	e of Business	Mailing Address				0114 00111 00 444 00018 18118 1404 0 101 1001	
3957 HUNTER'S	S ISI F DRIVE	3957 HUNTER'S ISLE DRIVE					
ORLANDO FL 32837-5816 ORLANDO FL 32837-5816							
					DO NOT WRITE	IN THIS SPACE	
					3. Date Incorporated or Qualified	*	
0.00.00.00					01/27/1994	<u> </u>	
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt.	# 010	Suite, Apt. #, etc.			59-3222691	Not Applicable	
22		h			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		27 City & State		8 Flation Council Figure 1			
23		28		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country		Zip Country		8. This corporation owes or has paid	· · · · · · · · · · · · · · · · · · ·		
24	25	29	30	,	Personal Property Tax due June 3		
	9. Name and Address of Curren		<u> </u>		10. Name and Address of New Reg		
LON	ZE, DIANE			81 Name A			
2750 N. MICHIGAN				82 Street Ad	Street Address (P.O. BoxyNumberyls Not Acceptable)		
KISSIMMBE FL 34744 N. Gr.)				82 Street Ad	1-C SPEAR PUNT OF	R1035	
	1	ADDRESS	•	83	, , , , , , , , , , , , , , , , , , ,		
		PADREO	,				
			ļ	84 City R Z	ANDO	FL 85 70837	
office or	registered egent or both in the State.	of Florida, Such change was s	hazizadtus	ve-named corp	poration submits this statement for the purpo ation's board of directors. I hereby accept th	use of changing its registered le appointment as registered	
	am familiar with, and accept the obliga	ations of, section 607.0505, Flo	orida Statu	ites.			
SIGNATURE	Signature, typed or printed name of registered agen	II and title if applicable. (NC	OTF: Register	nd Agent signature r	equired when reinstating)	DATE	
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	P	DELETE	1.1 TIT	.E		Change Addition	
NAME	JACKSON, RONALD D	1.2 NA		VE.		Change Carlotte	
STREET ADDRESS	AART SALE PORTER AAL IN DAM		1.3 STR	EET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32837-5816	NAMED DE COORT FOAC		Y-ST-ZIP			
TITLE	\$	DELETE				Change Addition	
NAME	JACKSON, RONALD D	2.2 NAA		AE		onange yteamen	
STREET ADDRESS	APP 14 UNPERA JOI P AD		2.3 STR	EET ADDRESS			
CITY-ST-ZIP	ORLANDO FL 32837-5816		2.4 C/T	Y-ST-ZIP			
TITLE		DELETE	3.1 TITI			Change Addition	
NAME		bound receive	3.2 NA	AE			
STREET ADDRESS			3.3 STR	EET ADDRESS			
CITY-ST-ZIP			•	Y-ST-ZIP			
TITLE		DELETE	4.1 TIT			Change Addition	
NAME		learned warmer to	4.2 NA	AE			
STREET ADDRESS			4.3 STR	EET ADORESS			
CITY-ST-ZIP	_		i i	Y-ST-ZIP			
TITLE		DELETE	5.1 TITI			Change Addition	
NAME			5.2 NA	AE			
STREET ADDRESS			5.3 STR	EET ADORESS			
CITY-ST-ZIP	_		5.4 CIT	r-ST-ZIP			
TITLE		DELETE	6.1 TITL	E		Change Addition	
NAME		 ^	6.2 NAN	1E			
STREET ADDRESS	<i></i>	1	6.3 STR	EET ADDRESS			
CITY-\$T-ZiP	//	·	6.4 CITY	/-ST-ZIP			
14. I hereby ce	rtify that the information supplied with	this filing does not qualify for the	ne exempl	ion stated in se	ection 119 07(3)(i) Florida Statutes I further	certify that the information	

indicated on this ennual report or supplied virit his time down for quality for the exemption stated in section 119.07(3)(j), Florida Statutes. I further certify that the information indicated on this ennual 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 this receive of trister 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 authority title in address.

NAME OF .

RZE034 (5/98)

.