

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # P94000046897**

1. Entity Name

GRAYS CONSTRUCTION USA, INC.**FILED****Mar 22, 2001 8:00 am**
Secretary of State

03-22-2001 90037 002 ***150.00

Principal Place of Business

**409 MARLOWE DRIVE
FORT WALTON BEACH FL 32547**

Mailing Address

**409 MARLOWE DR
FT WALTON BCH FL 32547
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-3254120**

Applied For

Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐**\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**LAW FIRM OF LAWRENCE J. SPIEGEL CHARTERED
343 ALMERIA AVENUE
CORAL GABLES FL 33134**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so. ☐
(See criteria on back)**FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00** May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP |
|-------|--------------------|-------------------|----------------------------|-------|------|----------------|-------------|
| P | GRAYS, WILLIAM JR. | 409 MARLOWE DRIVE | FORT WALTON BEACH FL 32547 | | | | |
| S | GRAYS, ELOISE | 409 MARLOWE DRIVE | FT WALTON BCH FL 32547 | | | | |
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13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Grays Jr.*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

William Grays Jr. OWNER

Date

3-17-01 850-863-3401

Daytime Phone #

CR2E034 (10/00)