2008 FOR PROFIT CORPÖRATION

FILED Jan 09, 2008 08:00 AN ate

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DOCUMENT # P94000070058 1. Enbity Name GRADY'S BAR, INC.				,	Secretai	ry of Sta	
Principal Plac	e of Business	Mailing Address	,	1			
707 S.E. THI	IRD AVENUE	707 S.E. THIRD AVENUE					
400 A FORT LAUDERDALE, FL 33316 400 A FORT LAUDERDALE, FL 33316			5	 	 	 	194 (1 11) 1 14 (11) 114 (11)
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te est, y estetic Light sesticities Light sesticities	Algeria (1945) (1945) er sammer er e	ing in the Agreement		5. Certificate	of Status Desired	□ \$8.75 Fee Red	Additional juired
	6. Name and Address of Current Re	gistered Agent		and the figure	was a guistina da est s	Land Company of the Section	m property
DISQUE, F 707 S.E. T 400	PHILIP THIRD AVENUE		DO:	NOT W	RITE		
	JDERDALE, FL 33316		and the street was the	HIS SF	engal Singapatan		
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE							
	Signature, typed or printed name of registered agent and	d Agent signature required	d when reinstating)		DATE		
	E NOW!!! FEE IS \$150.00 ay 1, 2008 Fee will be \$550.00	noing \$5	.00 May Be led to Fees				
10.	OFFICERS AND DI	RECTORS		and the state of		The same of the same	1 2 44 5 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DISQUE, PHILIP A 707 SE 3RD AVENUE, STE. 400 FT LAUDERDALE, FL 33316			and the second s	01/09/08-	777055 80049-003.	150,00
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12. Thereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attact perit with an address, with all other like empowered

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

PHILIP DISQUE

954-523-<u>269</u>7

Daytime Phone #