


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 06, 2004 08:00 AM
Secretary of State

DOCUMENT # P95000014711	
1. Entity Name GRAPPAS, INC.	

Principal Place of Business 14 N PALAFOX PENSACOLA, FL 32501 US	Mailing Address P.O. BOX 789 GULF BREEZE, FL 32562-0789
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07012004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-3296377	Applied For Not Applicable
5. Certificate of Status Desired 10	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DE BALTHAZAR, PANDORA M 14 N PALAFOX PENSACOLA, FL 32501
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

**FILE NOW!!! FEE IS \$550.00
Due by September 8, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00** May Be
Added to Fees

**U000000163294
07/06/04-80007-018 558.75**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DE BALTHAZAR, PANDORA M 14 N PALAFOX PENSACOLA, FL 32501
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DO NOT WRITE IN THIS SPACE

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Pandora M. de Balthazar* **PRESIDENT** *7/1/04* **850-432-4777**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #