FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P96000003180 (2)

G R MANUFACTURING CORP.

Principal Place of Business

Mailing Address

1211 NE 8TH AVENUE FORT LAUDERDALE FL 33304 1211 NE 8TH AVENUE FORT LAUDERDALE FL 33304

FILED May 22 1998 8:00am Secretary of State



2. Principal Place of Business		2a. Mailing Address			4. FEI Number APPLIED FOR 65-0768/65 Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt #, etc.			60.75	
22		27			5. Certificate of Status Desired Fee Required	
City & State		City & State	4		Election Campaign Financing \$5.00 May Be	
23		28	28		Trust Fund Contribution Added to Fees	
Zip	Country	Zφ	Country		8. This corporation owes or has paid the current year Intangible	
24 25		29	30		Personal Property Tax due June 30. Yes No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Age						
ROMERO, GABRIEL				Name		
1211 NE 8TH AVENUE				82 Street Address (P.O. Box Number is Not Acceptable)		
FORT LAUDERDALE FL 33304			-			
			B3	83		
			84	City	FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered						
office or registered agent, or both, in the State of Horida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE Signature, typed or printed native of registrated agent and title it applies table (NOTE Registered Agent signature required when renistating) OATE						
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	DELETE	1.1 TOTLE		☐ Change ☐ Addition	
NAME	ROMERO, GABRIEL		1.2 NAME			
STREET ADDRESS	AAA4 LEE ATREET		13 STREE	ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL 33020	OD FL 33020 1.41		ST - Z(P		
TITLE		DELETE	21 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	ADDRESS		
CITY-ST-ZIP			2.4 CITY-	ST-ZIP	1	
TITLE		☐ DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	ADDRESS		
CITY-ST-ZIP			3.4. CITY-	ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	ADDRESS		
CITY-ST-ZIP			4.4 CITY-1	ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE		Change Addition	
NAME	1		5.2 NAME			
STREET ADORESS			5.3 STREE	ADDRESS		
CITY-ST-ZIP			5.4 City -	ST - ZIP		
TITLE		DELETE	61 THTLE		☐ Change ☐ Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREE	ADDRESS		
CITY-ST-ZIP			6.4 City	S1-ZIP	0	

Thereby 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal offect 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 12 or Block 13 if changed, or on an attachment with an address.