1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9600040754

1. Corporation Name

ROBERT GRANT ENTERPRISES, INC.

## **FILED** Mar 02, 1999 8:00 am Secretary of State

03-02-1999 90132 001 \*\*\*150.00

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Principal Place	o of Business	Mailing Address			<b>ad</b> iik <b>bu</b> iki <b>dia</b> ii <b>aa</b> ikk i <b>ude</b> k okiik bidk 1001
		<u> </u>			
421 S.E. 10TH APT. 104A	81.	421 S.E. 10TH ST. APT. 104A			
DANIA FL 33004 DANIA FL 33004			DO NOT WRITE	IN THIS SPACE	
				3. Date Incorporated or Qualifed	
2 Principal P	lace of Business	2a, Mailing Address		05/13/1996 4. FEI Number	T Annied For
— A	OD TIGERTAIL		TIGERTALL BU		Applied For
21 <b>LO</b> 7 Suite, Apt.		26 '2070 D Suite, Apt. #, etc.	1100014-12-04	05-0070594	\$8.75 Additional
22		27	<b>-</b>	5. Certificate of Status Desired	Fee Required
City & State		City & State	<b>₽</b> ~,	6. Election Campaign Financing	\$5.00 May Be
	NIA, FL	28 DANIA	ヤレ	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes the curren	
24 うう	004 25 USA	29 33∞4 129 33∞4	30 USA	Personal Property Tax.	✓ Yes □ No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Reg	gistered Agent
SCH	EIFLEY, ROBERT		oi Name		
	S.E. 10TH ST.		82 Street Add	ress (P.O. Box Number is Not Acceptable	e)
	104A				
	IA FL 33004		83		İ
סרוני	IN I L GOOGT		84 City		85 Zip Code
11 Pursuant	to the provisions of Sections 607.0502 :	and 607.1508, Florida Sta	itutes, the above-named corp	poration submits this statement for the pu	rpose of changing its registered
office or r	egistered agent, or both, in the State of	Florida, Such change wa	s authorized by the corporati	ion's board of directors. I hereby accept t	ne appointment as registered
office or re agent. I a	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida. Such change wa ons of Section 607.0505,	s authorized by the corporati Florida Statutes.	ion's board of directors. I hereby accept t	ne appointment as registered
office or re agent. I as	egistered agent, or bith, in the State of manifer with an and accept the obligation	Florida. Such change wa ons of Section 607.0505,	ROBERT	SCHEIFLEY PP	1-6-99
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14. 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 annual 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 corporat Block 12 or Block 13 if changed on or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in or the receiver or trustee empowered with an address, with all other like empowered.

SIGNATURE:

ROBERT SCHEIFUE