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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000049966 (0)

GREY COMPANIES INCORPORATED

FILED May 07 1997 8:00am Secretary of State



Principal Plac	e of Business	Mailing Add	ng Address						
	M LAKE, STE. 1506		4807 VIA PALM LAKE, STE. 1506 WEST PALM BEACH FL 33417-2734						
WEST PALM B	BEACH FL 33417	WEST PALM	BEACH FL 334	17-2734		i i			
						3. Date Incorporated or Qualified 06/10/1996	3a. Date of Las	t Report	
2. Principal P	lace of Business	2a. Mailing	Address			4, FEI Number		Applied For	
21		26				65-0667525		Not Applicable	
Suite, Apt	#, etc	<u>├</u>	pt. #, etc.			5. Certificate of Status Desired	1 1	5 Additional	
22		27					Fee	Required	
City & State	е	<u> </u>	City & State			Election Campaign Financing		0 May Be	
23 Zip	Country	28 Zip		Country		Trust Fund Contribution		ed to Fees	
24	25	29	3	-n ·		8. This corporation has liability for in	Mangible tax unde Yes □ No	rs. 199.032,	
	9. Name and Address of C			<u> </u>		10. Name and Address of New Rec		···	
ANI	DERSON, YVONNE			81	Name				
	9 STARK LAKE COURT			4.7					
	RT ST. LUCIE FL 34952	•	82 Street Ac			Address (P.O. Box Number is Not Acceptabl	e)		
	(1 0): E00ID 1 E 0100E			83			·		
				84	City		FL 85 Z	ip Code	
11. Pursuant	to the provisions of Sections 60	7.0502 and 607.1508.	Florida Statutes	the above	-named	corporation submits this statement for the ne	urpose of changing	n its registered	
office or r	egistered agent, or both, in the im familiar with, and accept the	State of Florida Such a	change was aut	horized by	the corp	corporation submits this statement for the proporation's board of directors. I hereby accept	t the appointment	as registered	
_	пттапшаг with, апо восерт ше	obligations of, Section	607.USUS, FIORIC	aa Statutes	ò.]	
SIGNATURE	Signature, typed or printed name of register	red agent and title if applicable.	(NOTE: F	legistered Age	ni signatura	required when reinstating)	DATE		
12.	OFFICER	S AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICE		ORS IN 12	
TITLE			DELETE	1.1 TITLE		PRESIDENT	☐ Chang		
NAME				1.2 NAME		KEN K. GREY		·	
STREET ADDRESS				1.3 STREET	ADDRESS	4807 VIAPALM LAKE			
CITY-ST-ZIP				1.4 CITY - S	T-ZIP	WEST PARM BEACH, FL	38417		
TITLE			DELETE	2.1 TITLE		VICE PRESIDENT	☐ Chang	e Addition	
NAME				2.2 NAME		SANDRA CHAIKIN		. •	
STREET ADDRESS				2.3 STREET		4807 VIN PALM LAKE			
CITY-ST-ZIP				2.4 CITY-S	T-ZIP	WEST PALM BEACH, FL	3347 -		
TITLE		L	DELETE	3.1 TITLE			Chang	e 🔲 Addition	
NAME				3.2 NAME					
STREET ADDRESS				3.3 STREET	address				
DITY - ST - ZIP			The sec	3.4. CITY - S	T-ZIP				
TITLE		L.	_] DELETE	4.1 TITLE			L Chang	e L Addition	
NAME				4. 2 NAME				İ	
STREET AUDRESS				4.3 STREET					
CITY-ST-ZIP			ן חבו <i>בדר</i>	4.4 CITY-S	T- ZIP				
TIFLE		L	DELETE	5.1 TITLE			Chang-	e	
NAME proces anabece				5.2 NAME	4000000				
STREET ADDRESS				5.3 STREET					
CITY-ST-ZIP			DELETE	5.4 CITY - ST	I - ZIP		[] (h	Addie	
TITLE		Ļ	ריניונ	6.1 TITLE			Change	e	
NAME				6.2 NAME					
STREET ADDRESS				63 STREET]	
CHY-SI-ZIP	ay cartifu that the information ou	policed with this files a		64 CITY-ST	-ZIP	440 0 V - 440 070V FI V 0			

on nereby 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE