

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPLICATION

FOR

FLORIDA DEPARTMENT OF STATE

Secretary of State

DIVISION OF CORPORATIONS



98AR

FILED

98 JUN 22 PM 3:40

ALLA W/STP, FLORIDA

DOCUMENT # 996000103898

1. Corporation Name

GR Trading, Inc.

Principal Place of Business

Mailing Address

2851 SW 71st Terrace, Suite 1113  
Davie, Florida 33314

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

2. New Principal Office Address, If Applicable

3. New Mailing Office Address, If Applicable

4. Date Incorporated or Qualified To Do Business in Florida

1/1/97

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. FEI Number

Applied For

City & State

City & State

65-0716681

Not Applicable

Zip

Country

Zip

Country

6. CERTIFICATE OF STATUS DESIRED ☒

\$8.75 Additional Fee required for a Certificate of Status

7. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

1 Title(s)	2 Name of Officers and/or Directors	3 Street Address of Each Officer and/or Director (Do NOT Use Post Office Box Numbers)	4 City / State / Zip
P	Ramil Khismatullin	700 NE 2nd St. #10 Hallandale FL 33009	Hallandale FL 33009
T	Ramil Khismatullin	"	900002571779--5 -06/25/98--01009--010
S	Ramil Khismatullin	"	***158.75 ***158.75
D	Ramil Khismatullin	"	

8. Name and Address of Current Registered Agent

9. Name and Address of New Registered Agent

AmeriLawyer Chartered  
343 Almeida Ave.  
Coral Gables FL 33134

Name Victor Zizev  
Street Address (P.O. Box Number is Not Acceptable)  
2851 SW 71st Terr.  
Suite, Apt. #, Etc.  
1113  
City DAVIE  
State FL Zip Code 33314

10. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of Section 607.0505, F.S.

Signature of Registered Agent

[Signature]

REGISTERED AGENT MUST SIGN

Date 6/10/97

11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.

Yes ☒ No ☐

(See other side for information on intangible tax.)

12. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

6/10/97

Date

(954) 458-0825

Daytime Phone #

CR2040 (1-98)