

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

FILED

Apr 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P97000023864 (6)**

1. Corporation Name

GREENSTONE FINANCIAL CORP.

Principal Place of Business

Mailing Address

**4691 NORTH UNIVERSITY DRIVE
SUITE 365
CORAL SPRINGS FL 33071**

**4691 NORTH UNIVERSITY DRIVE
SUITE 365
CORAL SPRINGS FL 33071**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/17/1997

4. FEI Number

65-0740868

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☒ Yes ☐ No

10100 West Sample Road

2. Principal Place of Business

2a. Mailing Address

9030 W. Sahara Ave

9030 W. Sahara Ave.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

Suite 394 Suite 304

Suite 394

City & State

City & State

Coral Springs, FL

Las Vegas, NV

Zip

Zip

33065

89117

Country

Country

USA

USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GRUNDSTEDT, STEVEN H
4691 NORTH UNIVERSITY DRIVE
SUITE 365
CORAL SPRINGS FL 33071

Okay (new address)

81. Name

STEVEN H. GRUNDSTEDT

82. Street Address (P.O. Box Number is Not Acceptable)

9030 W. Sahara Ave 10100 West Sample Road

83.

Suite 394 Suite 304

84.

City Las Vegas NV Coral Springs FL

85. Zip Code

33065

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 Florida. 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 name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

MR. Steven H. Grundstedt (President)

STEVEN H. GRUNDSTEDT

27 Mar 98

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GRUNDSTEDT, STEVEN H	
STREET ADDRESS	4691 NORTH UNIVERSITY DRIVE, SUITE 365	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	DWYER, RICHARD R JR	
STREET ADDRESS	4691 NORTH UNIVERSITY DRIVE, SUITE 365	
CITY-ST-ZIP	CORAL SPRINGS FL 33071	
TITLE	P	<input type="checkbox"/> DELETE
NAME	STEVEN H. GRUNDSTEDT	
STREET ADDRESS	10100 WEST SAMPLE ROAD, SUITE 304	
CITY-ST-ZIP	Coral Springs, FL 33065	
TITLE	V	<input type="checkbox"/> DELETE
NAME	Richard R. Dwyer, Jr	
STREET ADDRESS	10100 West Sample Road, Suite 304	
CITY-ST-ZIP	Coral Springs, FL 33065	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Teri H. Grundstedt	
STREET ADDRESS	9030 W. Sahara Ave, Suite 394	
CITY-ST-ZIP	Las Vegas, NV 89117	
TITLE	D	<input type="checkbox"/> DELETE
NAME	Violeta R. Dwyer	
STREET ADDRESS	10100 West Sample Road, Suite 304	
CITY-ST-ZIP	Coral Springs, FL 33065	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Steven H. Grundstedt	
1.3 STREET ADDRESS	10100 West Sample Road, Suite 304	
1.4 CITY-ST-ZIP	Coral Springs, FL 33065	
2.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	Richard R. Dwyer, Jr.	
2.3 STREET ADDRESS	10100 West Sample Road, Suite 304	
2.4 CITY-ST-ZIP	Coral Springs, FL 33065	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Teri H. Grundstedt	
3.3 STREET ADDRESS	9030 W. Sahara Ave, Suite 394	
3.4 CITY-ST-ZIP	Las Vegas, NV 89117	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	Violeta R. Dwyer	
4.3 STREET ADDRESS	10100 West Sample Road, Suite 304	
4.4 CITY-ST-ZIP	Coral Springs, FL 33065	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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 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.

SIGNATURE: **STEVEN H. GRUNDSTEDT (President/Registered Agent)**

MR. Steven H. Grundstedt
26 Mar 98
702-363-3335

CR2E034 (10/97)