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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000032969

GRANDA ENTERTAINMENT INC.

Principal Place	e of Business	Mailing Address				()##(1##() # (#() (##)(##)(##)	11 08111 20100 1	1110 11919	1844 844		
10544 NW 26TH STREET 13644 S.W. 142 AVENUE #D SUITE E-104 MIAM! FL 33186-6700 MIAM! FL 33172 US					DO NOT WRITE IN THIS 3. Date Incorporated or Qualifed			SPAC <u>E</u>			
					ĺ	04/10/1997					
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number			Applie	ed For	
21 26 104 U.W. >6					7	65-0744728		Not Applicable			
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 Suite, Apt. #, etc.						5. Certifcate of Status Desired		\$8.75 Additional Fee Required			
City & State City & State						6. Election Campaign Financing			\$5.00 May Be		
23		28 Milmi				Trust Fund Contribution			ded to F	ees	
Zip 24	Country 25			Country USA		8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No					
	9 Name and Address of Currer	nt Registered Agent	81	N		10. Name and Address of New R	egistered /	gent			
AGUILAR, JOSE L 4641 NW 97TH PLACE					Name Street Address (P.O. Box Number is Not Acceptable)						
MIAMI FL 33178						<u> </u>					
			84	City		<u> </u>	FL	85	Zip Coo	e	
office or r agent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obligations of the state of fegistered agents.	of Florida. Such change was author ations of, Section 607.0505, Florida S	izeo by Statutes	the corpo	oration	's board of directors. I hereby accep	ot the appoir	itment a	ıs regis		
12.			13.			ADDITIONS/CHANGES TO OF	ICERS AN				
TITLE	VP	☐ DELETÉ	1.1 TITLE					Cha	nge	☐ Addition (
NAME	AGUILAR, JOSE L		.2 NAME								
STREET ADDRESS	1011 1111 011111 2100			1.3 STREET ADDRESS						\	
CITY-ST-ZIP			4 CITY-ST-ZIP		-	RESIDENT		Change Addition			
NAME	GRANDA, JOSE A		2.2 NAME			<i>(L310-1)</i>		_			
STREET ADDRESS	4641 NW 97TH PLACE			T ADDRESS							
CITY-ST-ZIP	MIAMI FL 33178		2. 4 CITY-5	ST-ZIP							
TITLE		☐ DELETE :	3.1 TITLE	1				Cha	nge	Addition	
NAME		[:	3.2 NAME								
STREET ADDRESS			3 3 STREE	T ADDRESS						1	
CITY-ST-ZIP			3.4. CITY- 9	ST-ZIP				[] Cha	nge	Addition	
TITLE			4.1 TITLE	į					rige.	Addition	
NAME			4. 2 NAME	T ADDRESS							
STREET ADDRESS			4.3 STREE 4.4 CITY-S								
CITY-ST-ZIP TITLE			5.1 TITLE					Cha	nge	Addition	
NAME		į.	5.2 NAME	ļ						4	
STREET ADDRESS			5.3 STREE	TADDRESS							
CITY-ST-ZIP			5.4 CITY-S	T-ZIP							
TITLE		□ DELETE	6.1 TITLE	Т	I	1 .	P +	☐ Cha	inge	☐ Addition	

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 suppliemental 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, dronan attactment with an address, with all other like empowered.

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

□ DELETE

Mar 05, 1999 8:00 am Secretary of State

03-05-1999 90133 017 ***150.00