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

**PROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## P97000062025 (6) DOCUMENT #

GRUBBS & GRUBBS, INC.

Principal Place of Business

Mailing Address

## FILED Mar 13 1998 8:00am Secretary of State



10546 158TH STREET NORTH 10546 158TH STREET NORTH JUPITER FL 33478 JUPITER FL 33478 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 07/16/1997 2. Principal Place of Business 2a. Mailing Address 65-6768 465 Applied For 26 210 W.N. PARK STI 210 W.N. PARK ST. Not Applicable \$8.75 Additional X 5. Certificate of Status Desired # 104 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30, 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name GRUBBS, ROBERT W 10548 158TH STREET NORTH 82 Street Address (P.O. Box Number is Not Acceptable) **JUPITER FL 33478** 83 84 City 85 Zip Code 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) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NAME **GRUBBS. ROBERT W** 1.2 NAME 10546 158TH STREET NORTH 1.3 STREET ADDRESS STREET ADDRESS JUPITER FL 33478 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Change Addition TITLE 31 TITLE 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Addition TITLE 61 TITLE 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 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.

Was Arcs.

3/5/98

1-941-467-7566