

2001 UNIFORM BUSINESS REPORT (UBR)

2000/2001

Pg 1 of 3

DOCUMENT # P97000074722

1. Entity Name

GRN CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATION

01 APR 12 AM 9:36

Principal Place of Business
12717 West Sunrise Blvd.
Suite 360
Sunrise, FL 33323
US

Mailing Address
12717 West Sunrise Blvd.
Suite 360
Sunrise, FL 33323
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

65-0778304

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CHANEY, ROBERT K.
2100 WEST 76 STREET
SUITE 211
HIALEAH, FL 33016

Name

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

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
P/D
LARA, RODRIGO
12505 NW 10 PLACE
SUNRISE, FL 33323 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
BARFOOT, PETER
12505 NW 10 PLACE
SUNRISE, FL 33323 ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
600004014086-9
-04/17/01--01099--026
****300.00 ****300.00 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
8/4/12 ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/1/00)

Bradford & Associates, P.A.



2100 West 76th Street • Suite 211 • Hialeah, Florida 33016
Telephone: (305) 825-6286 • 1-888-829-2723 (TAXCPA3)
Fax: (305) 825-6292 • E-Mail: bradfordcpa@bradfordcpa.com
Web Site: www.bradfordcpa.com

MEMBER
AMERICAN INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS
FLORIDA INSTITUTE OF
CERTIFIED PUBLIC ACCOUNTANTS

James N. Bradford, Jr., C.P.A.

Robert K. Chaney, C.P.A.

April 9, 2001

Mr. Sean Toner, Senior Section Administrator
Florida Department of State
Division of Corporations
P O Box 6327
Tallahassee, FL 32314

RE: GRN CORPORATION
REF. NUMBER: P97000074722

Dear Mr. Toner:

We have enclosed the Uniform Business Report for the year 2000 and 2001 for the above referenced corporation.

We feel that circumstances exist which meet reconsideration criteria for the acceptance of the 2000 Uniform Business Report and check in payment of filing fee and therefore reinstatement at no additional cost to this corporation.

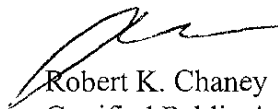
The company has only one person that manages the administration and operating functions of this corporation in the United States. The other officer of this corporation resides in the United Kingdom. The U.S. person suffered a heart attack at the end of 1999 and has been making an attempt at a full recovery. Therefore, he was unable to manage the corporation and comply with the filing requirements of the State of Florida.

Based upon the circumstances described above that the only reason for non-compliance was due to extenuating ill health, we respectfully request that this corporation be reinstated, that the fee for reinstatement be waived and that the report and check as presented be accepted.

Mr. Sean Toner, Senior Section Administrator
Florida Department of State
April 9, 2001
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Thank you for your cooperation in this matter. Should anything further be required, please contact this office directly.

Sincerely,



Robert K. Chaney
Certified Public Accountant

RKC/nm
Enc: