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

Secretary of State 03-10-1999 90122 028 ***150.00

85

Zip Code

FILED Mar 10, 1999 8:00 am

GRIND A REAN, INC.

1. Corporation Name

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Principal Place of Business Mailing Address

11755_SOUTHWEST 53RD PLACE : 11755 SOUTHWEST 53RD PLACE COOPER CITY F: 33330 COOPER CITY F: 33330 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 01/01/1998 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required ~ 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be \Box Added to Fees Trust Fund Contribution 23 28 Country Zip 8. This corporation owes the current year Intangible Zip Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent **AMERILAWYER** 82 Street Address (P.O. Box Number is Not Acceptable) 343 ALMERIA AVENUE CORAL GABLES FL 33134 83

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.

84 City

SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. ☐ DELETE Change ☐ Addition 1.1 TITLE TITLE FINKELSTEIN, HOWARD 1.2 NAME NAME 11755 SOUTHWEST 53RD PLACE 1.3 STREET ADDRESS STREET ADDRESS COOPER CITY F; 33330 1.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change □ DELETE 2.1 TITLE VSTD TITLE 2.2 NAME FINKELSTEIN, GALE NAME 11755 SOUTHWEST 53RD PLACE 2.3 STREET ADDRESS STREET ADDRESS COOPER CITY F; 33330 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 3.1 TITLE TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ DELETE ☐ Change 4.1 TITLE TITLE 4.2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ DELETE 51 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ DELETE 6.1 TITLE ☐ Change TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP 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, with all other like empowered.

SIGNATURE

HULLING FINALLY TO PRES.

3/2/99 Date 954. 434-2424 Datume Phone #

CR2E034 (11/98)