

FILED
Jun 11, 2002 8:00 am
Secretary of State

05-13-2002 90156 010 ***150.00

FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)

DOCUMENT #**P98000032280**

1. Entity Name:

SSS.G. ENTERPRISE INC.**DO NOT WRITE IN THIS SPACE**

92436

2. Principal Place of Business

2750 WASHINGTON ST

3. Mailing Address

2750 WASHINGTON ST.

Suite, Apt. #, etc

Suite, Apt. #, etc

DO NOT WRITE IN THIS SPACE

City & State
HOLLYWOOD, FLORIDACity & State
HOLLYWOOD, FLORIDA4. FEI Number
65-0836827Applied For
Not ApplicableZip
33020Country
USAZip
33020Country
USA8. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required****DO NOT WRITE IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name **GRONDIN, STEPHANE**Street Address (Box Number is Not Acceptable)
2750 WASHINGTON STREETCity **Hollywood** **FL** Zip Code **33020**

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 (Handwritten or printed name of registered agent and date of signature)

(NOTE: Registered agent signature is required when re-registering)

DATE

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

January 1st May 1st Fee is \$150.00
 April 1st May 1st Fee is \$350.00
 Annual UBR is \$81.25
 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**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**PO
GRONDIN, STEPHANE
2750 WASHINGTON STREET
HOLLYWOOD, FL 33020**

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13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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 on an attachment with an address, with all other like empowered.

SIGNATURE:

Stephan Grondin **STEPHAN GRONDIN** 4/26/02 (254) 927-1584
 Signature and typed or printed name of signing officer or director Date Daytime Phone

CR2004B (12/01)