

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P98000091257

1. Entity Name
GROGNARD CORPORATION

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

01 DEC 17 AM 10:37

Principal Place of Business Mailing Address
112 S. HIBISCUS DR. 112 S. HIBISCUS DR.
MIAMI BCH FL 33139 MIAMI BCH FL 33139



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 3. Mailing Address
Suite, Apt. #, etc. Suite, Apt. #, etc.
City & State City & State

4. FEI Number **65-0877601** Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANGEN, MAX
112 S. HIBISCUS DR.
MIAMI BCH FL 33139

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

(NOTE: Registered Agent signature required when reinstating)

10/8/01
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 ☐ Delete
NAME **D**
STREET ADDRESS **ANSIN, ULRICH**
CITY-ST-ZIP **3321 BAYVIEW GATE**
FT. LAUDERDALE FL 33308

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **319 S. RIVERSIDE DR.**
CITY-ST-ZIP **FT. LAUDERDALE, FL 33062**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS **100004743011-0**
CITY-ST-ZIP **-12/28/01--01074--004**
******150.00 ****150.00**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ Delete
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STREET ADDRESS
CITY-ST-ZIP

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CITY-ST-ZIP

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]*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/8/01 (255) 514-8035
Date Daytime Phone #

017042

CR02034 (10/00)

LANGEN & LANGEN, P.A.

ATTORNEYS AT LAW
112 SOUTH HIBISCUS ISLAND
MIAMI, FLORIDA 33139-5130

HILARY LANGEN *
ROLAND LANGEN *
CHRISTOPHER LANGEN +
MAX LANGEN ♦

TEL. (305) 674-0023
FAX (305) 674-0022
MAX@LANGEN.ORG

* ADMITTED IN FLORIDA AND BRAZIL
+ ADMITTED IN FLORIDA AND NEW YORK
♦ ADMITTED IN FLORIDA AND BEFORE THE
U.S. PATENT AND TRADEMARK OFFICE

Uniform Business Report
Division of Corporations
P.O. Box 1500
Tallahassee, FL 32302-1500

Re: Grogard Corporation
Document # P98000091257

Dear Sirs,

Our client, Mr. Ulrich Ansin, sent you a check in the amount for \$150.00 on April 16, 2001. You have not cashed his check and he sent a replacement check on September 6 in the amount for \$150.00. You have not processed his second check because you wanted more information on the exact date of the first check.

I enclose a copy of the old check that was sent on April 16, as well as the new check in the amount for \$150.00.

Thank you.

Sincerely,


Max Langen