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

PROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P98000101948

GRADA ENTERPRISES, INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90157 029 ***150.00



Principal Place of Business Mailing Address							BI 11211 3611	,, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-,	
7940 NE 10TH		17940 NE 10TH AVENUE	17940 NE 10TH AVENUE NORTH MIAMI BEACH FL 33162								
NORTH MIAMI B	EACH FL 33162	NORTH MIAMI BEACH FL				DO NOT WRITE IN THIS SPACE					
						3. Date Incorporated or Qualifed					
						12/04/1998					
2. Principal P	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied					
21		26	 			65-0877973		*0.		Applicable	
Suite, Aţ t.	#, etc. 	Suite, Apt. #, etc.	27			5. Certificate of Status Desired]	\$8.75 Ac ditional Fee Required			
City & Stat	e	City & State	⊢ '			6. Election Campaign Financing		-		lay Be	
23		28	Count			Trust Fund Contribution			ded to	rees	
Zip	Country	Zip				8. This corporation owes the current year Intangible Personal Property Tax.					
24	25	25 29 30 e and Add ess of Current Registered Agent					d Address of New Registered Agent				
	9. Name and Add ess of Cur	Tettt (registered Agent	8	1 Na	me	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,					
HAYC	N, DAVID										
17940 NE 10TH AVENUE			8	2 Str	eet Addr	ress (P.O. Box Number is Not Acceptable)				
NORT	H MIAMI BEACH FL 33162		8	3							
			L					7051	7:- 0		
			8	4 City	¥		FL	85	Zip C	ide	
office cri	to the provisions of Sections 607, egistered agent, or bo h, in the St m familiar with, and accept the ob	ate of Florida. Such change was	i iluthorized E	ογ the c	ned corp orporation	poration submits this statement for the pur on's board of cirectors. I hereby accept the	pose of o e appoin	hangin tment a	ng its r as reg	egistered stered	
SIGNATURE											
·	Signature, typed or printed na ne of registered	<u> </u>		ent signa	ture required	ADDITI(INS/CHANGES TO OFFIC	DATE	DIPE	CTOE	S IN 12	
		ANI) DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICE	ERS /INI	☐ Cha		Addition	
TITLE	PTD	□ pereis								_	
NAME	HAYON, DAVID		1.2 NAM	ET ADDR	Eee						
	17940 NE 10TH AVENUE	160									
CITY-ST-ZIP TITLE	NORTH MIAMI BEACH FL 33162 OFLETE			14 CITY-ST-ZIP 2.1 TITLE				☐ Cha	ange	Addition	
NAME	HAYON, GRAZIA		ı	2.2 NAME							
	17940 NE 10TH AVENUE			2.3 STREET ADDRESS							
CITY-ST-ZIP	NORTH MIAMI BEACH FL 33	162	2. 4 CITY]	
TITLE	HOTTIT INDANI DESCRITTE OC	[] DELETE	3.1 TITLE					Cha	ange	Addition	
NAME			3.2 NAM	E							
STREET ADDRESS			3.3 STRI	ET ADOR	ESS						
CiTY-ST-ZIP			3.4. CITY	-ST-ZIP							
TITLE		☐ DELETE	4.1 TITLI	Ε				Cha	ange	☐ Addition	
NAME			4. 2 NAM	1E							
STREET ADDRESS			4.3 STRI	EET ADDR	ESS.						
CITY-ST-ZIP			4 4 CITY	-ST-ZIP							
TITLE		☐ DELETE	5.1 TITLI		1			☐ Cha	ange	Addition (
NAME			5.2 NAM								
STREET ADORESS				EET ADDR	ESS						
CITY-ST-ZIP			5.4 CITY					- CI-		☐ Addition	
TITLE		☐ DELETÉ	61 TITLE					☐ Cha	ange	☐ Addition	
NAME			62 NAM		1500						
STREET ADDRESS			6.3 STR	EET ADOR	E99						

14. I herety certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.0. (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 ham 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: