

2001 UNIFORM BUSINESS REPORT (UBR)

FILED

May 07, 2001 8:00 am
Secretary of State

05-07-2001 90019 009 ***150.00

DOCUMENT # P99000066572

1. Entity Name

~~PRINCIPAL HOME LENDING, INC.~~
GROVEBAY FINANCIAL, INC.

Principal Place of Business

~~9835 SUNSET DR., STE. 202~~
~~MIAMI FL 33173~~
3326 MARY ST., #301
MIAMI, FL 33133

Mailing Address

~~9835 SUNSET DR., STE. 202~~
~~MIAMI FL 33173~~
3326 MARY ST., #301
MIAMI, FL 33133

2. Principal Place of Business

3326 MARY ST.
Suite, Apt. #, etc.
301

3. Mailing Address

3326 MARY ST.
Suite, Apt. #, etc.
301

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33133

Country

USA

Zip

33133

Country

USA

4. FEI Number

65-0932356

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GONZALEZ-ABREU, JAVIER
9835 SUNSET DRIVE, #202
MIAMI FL 33173

7. Name and Address of New Registered Agent

Name **JAVIER GONZALEZ-ABREU**

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

3326 MARY ST.
SUITE 301

City

MIAMI

FL

Zip Code

33133

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]

JAVIER GONZALEZ-ABREU / PRESIDENT

4/26/01

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

TITLE	DPT	<input checked="" type="checkbox"/> Delete
NAME	GONZALEZ-ABREU, JAVIER	
STREET ADDRESS	9240 SUNSET DR., STE. 247 3326 MARY ST., #301	
CITY-ST-ZIP	MIAMI FL 33173 MIAMI, FL 33133	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
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NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	PRESIDENT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAVIER GONZALEZ-ABREU	
STREET ADDRESS	3326 MARY ST., STE. 301	
CITY-ST-ZIP	MIAMI, FL 33133	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
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]

JAVIER GONZALEZ-ABREU

Date

4/26/01

Daytime Phone #

305-274-1800

CR2034 (10/00)