## 2000 UNIFORM BUSINESS REPORT (UBR)

## DOCUMENT # S13240 Apr 03, 2000 8:00 am Secretary of State 1. Entity Name GRX CORP. 04-03-2000 90164 020 \*\*\*150.00 Principal Place of Business Mailing Address 100 CENTURY BLVD 100 CENTURY BLVD WEST PALM BEACH FL 33417 WEST PALM BEACH FL 33417-2262 3. Mailing Address 2. Principal Place of Business DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 65-0266720 Not Applicable Zip Country 7in Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name HAUFF, ELAINE Street Address (P.O. Box Number is Not Acceptable) 100 CENTURY BLVD WEST PALM BEACH FL 33417 Zip Code FL 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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing \$5.00 May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees Make Check Payable to Department of State (See criteria on back) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 12. OFFICERS AND DIRECTORS 11. ☐ Addition ☐ Change TITI F ☐ Delete TITLE LEVY, H. IRWIN NAME NAME STREET ADDRESS 100 CENTURY BLVD STREET ADDRESS CITY-ST-ZIP WEST PALM BCH FL 33417 CITY-ST-ZIP ☐ Change Addition ☐ Delete TITL F TITLE HAUFF, ELAINE NAME NAME STREET ADDRESS STREET ADDRESS 100 CENTURY BLVD CITY-ST-ZIP CITY-ST-ZIP WEST PALM BCH FL 33417 ☐ Change Addition TITLE ☐ Delete TITLE MESHON, LOUIS SR. NAME NAME STREET ADDRESS STREET ADDRESS 100 CENTURY BLVD. CITY-ST-ZIP CITY-ST-ZIP WEST PALM BEACH FL 33417 ☐ Change ■ Addition □ Delete TITLE TITLE FLOYD, ORILLA NAME NAME STREET ADDRESS 100 CENTURY BLVD STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **WEST PALM BEACH FL 33417** ☐ Change Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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:

Elaine Hauff, V.P. GNING OFFICER OR DIRECTOR

3/21/2000