FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT 1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
MAY -1 AM 8:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # S62954 (0)

1. Corporation Name
G & R SALES, INC.

Principal Place of Business	Mailing Address
5109 COCONUT CREEK PKWY. MARGATE FL 33063 US	5109 COCONUT CREEK PKWY. MARGATE FL 33063 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/24/1991
3a. Date of Last Report: 08/12/1994
4. FEI Number: 65-0268489 — Applied For / Not Applicable
5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business — 21 / 22 Suite, Apt. #, etc. / 23 City & State / 24 Zip / 25 Country
2a. Mailing Address — 26 / 27 Suite, Apt. #, etc. / 28 City & State / 29 Zip / 30 Country

9. Name and Address of Current Registered Agent

MEISLER, MICHAEL C.
9900 WEST SAMPLE ROAD
SUITE 200
CORAL GABLES FL 33065

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

12. OFFICERS AND DIRECTORS

TITLE	D
NAME	BARONA, JORGE
STREET ADDR	5109 COCNUT CREEK PKWY
CITY-ST-ZIP	COCONUT CREEK FL
TITLE	D
NAME	TSCHOKE, RICHARD
STREET ADDR	5109 COCNUT CREEK PKWY
CITY-ST-ZIP	COCONUT CREEK FL
TITLE	
NAME	
STREET ADDR	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDR	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDR	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDR	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 TITLE / 1 NAME / 1 STREET ADDRESS / 1 CITY-ST-ZIP ☐ Change ☐ Addition
2 TITLE / 2 NAME / 2 STREET ADDRESS / 2 CITY-ST-ZIP ☐ Change ☐ Addition
3 TITLE / 3 NAME / 3 STREET ADDRESS / 3 CITY-ST-ZIP ☐ Change ☐ Addition
4 TITLE / 4 NAME / 4 STREET ADDRESS / 4 CITY-ST-ZIP ☐ Change ☐ Addition
5 TITLE / 5 NAME / 5 STREET ADDRESS / 5 CITY-ST-ZIP ☐ Change ☐ Addition
6 TITLE / 6 NAME / 6 STREET ADDRESS / 6 CITY-ST-ZIP ☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(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 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Richard Tschoke — 4-25-95 — (305) 979-4076

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone

0106101 CP