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

SIGNATURE:

May 01 1998 8:00am **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State **ANNUAL REPORT** Secretary of State 1998 DIVISION OF CORPORATIONS DOCUMENT # (8)GRITS & GRUNTS, INC. Principal Place of Business Mailing Address 4900 S.W. 95TH CT. 4960 S.W. 95TH CT. MIAM! FL 33165 MIAMI FL 33165 DO NOT WRITE IN THIS SPACE HS 3. Date Incorporated or Qualified 01/13/1992 2. Principal Place of Business 2a. Mailing Address Applied For 11491 SW 7240 Pc 11491 SW 65-0332997 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No USA USM Personal Property Tax due June 30. 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent KEY CORPORATE SERVICES INC. 111 N.E. 1ST ST. 82 MIAM! FL 33132 83 IAMI 0502 and 607, 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered tate of florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered highlightens of Suction 607,0505, Florida Statutes. 11. Pursuant to the provi office or registered agent. I am familiar v SIGNATURE (NOTE Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TIFLE S S TETLE NAME VAN AKEN, JANET A 1.2 NAME 11491 SW 72ND PLACE STREET ADDRESS 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition NAME 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3 1 TITLE Change Addition TITLE 3 2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY - 5T - ZIP CITY-ST-ZIP Change DELETE TITLE 4.1 TITLE Addition NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Addition TITLE 51 TITLE 5.2 NAME NAME 5 3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change ☐ Addition TITLE 6.1 TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 14. 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 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 of the receiver or trustee employee to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changer, or order attachment with an artificial.

FILED