03-29-1999 90072 011 \*\*\*150.00

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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # V07490 1. Corporation Name

GRITS	& GRUNTS, INC							
Principal Pla	ce of Business	Mailing Address			<u></u>			3,2,1,0,2,1,1,0,0
11491 SW 72ND PL 11491 SW 72ND PL						•		
MIAMI FL 33156 MIAMI FL 33165								
US		US				DO NOT WRITE IN THIS	SPACE	
	,					3. Date Incorporated or Qualified 01/13/1992		
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number	A	oplied For
21		26				65-0332997	No	ot Applicable
Suite, Ap	t. #, etc.	Suite, Apt. #, etc.		,	<u> </u>	5. Certificate of Status Desired		Additional equired
City & Sta		City & State				6. Election Campaign Financing	\$5.00	May Be
_						Trust Fund Contribution		to Fees
Zip	Country Zip Co			try		8. This corporation owes the current year Int		
		<b>—</b>	_	,		Personal Property Tax.	X Yes	□No
24	9. Name and Address of Curren		<u>'</u>			10. Name and Address of New Registered	<u>/ ~ </u>	
	5. Name and Address of Curren	it Kadisteleo Adem		81	Name	10. 110		
VAN AKEN, JANET								
11491 SW 72ND PL				82 Street Address (P.O. Box Number is Not Acceptable)				
MIAMI FL 33156							<u></u>	
19117	4WI F C 33 130		- 1	83				ļ
			- 1	84	City		85 Zip	Code
					•	FL FL	. [ ]	
l office or	nt to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was auth	ionzea i	DV II	named corp ne corporation	poration submits this statement for the purpose of on's board of directors. I hereby accept the appoint appoint the purpose of the purpose of the purpose of the purpose of the purpose of the purpose of the purpose the purpose the the purpose the the purpose the the purpose the the purpose the the the the the the the th	changing its ntment as re	s registered egistered
SIGNATURE	Signature, typed or printed name of registered ager	ot and title if anolicable /NOTE: Re	nistered A	oent s	signature require	od when reinstating) DATE		<del></del> [
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTO	ORS IN 12
TITLE	PST	DELETE 1.1		.E			Change	☐ Addition
	VAN AKEN, JANET A							
NAME	14404 OUT 70110 DI LOF		l		ADDRESS			]
STREET ADDRES	MIAMI FL							j
CITY-ST-ZIP			1.4 CITY		ZIP		Change	Addition
TITLE			2.1 TITL		- }			
NAME	1	•	2.2 NAM					]
STREET ADDRES	s				ADDRESS			
CITY-ST-ZIP			2.4 CfT		-ZIP			- Addition
TITLE	)	☐ DELETE	3.1 TITL	E.			☐ Change	☐ Addition
NAME	1		3.2 NAN	Æ				ţ
STREET ADDRES	ss		3.3 STR	REETA	ADDRESS	.*		
CITY-ST-ZIP	<u> </u>		3.4. CITY-5		-ZIP			
TITLE		☐ DELETE	4.1 TITL	E		~	☐ Change	☐ Addition }
NAME			4. 2 NA	ME				{
STREET ADDRES	ss		4.3 STR	EET A	ADDRESS			
CITY-ST-ZIP	· ·		4.4 CITY	Y-ST-	ZIP			
TITLE		□DELETE	5.1 TITL				Change	☐ Addition

CITY-ST-ZIP 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 comporation 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

□ DELETE

SIGNATURE:

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

Change

Addition