FILE NOW: FILING FEE AF PROFIT CORPORATION ANNUAL REPORT 1996		FEORIDA DEPARTMI Sandra B. M. Secretary of	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			
DOCUM	ENT # V2328	7 (8)				
 Corporation Na 	ame					
GRANDFA	ATHER, INC.					
	D	Mailing Address			-	OD! 21011 Gj al i Pidit Aidit dibit dibit esat
Principal Made of Business						
2934 60TH AVE SOUTH ST PETERSBURG FL 33712 ST PETERSBURG FL 33712					to de Codifica	3a. Date of Last Report
					3. Date Incorporated or Qualified 03/24/1992	05/01/1995
2. Principal Place	of Puninger	2a. Mailing Address			4. FEI Number	Applied For
2. Principal Place	6 O: Driginess	26			59-3115615	Not Applicable \$8.75 Additional
Suite. Apt. #,	etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be Added to Fees
23		28	Country		Trust Fund Contribution 8. This corporation has liability for	intangible tax under s. 199.032.
Zip 24 ∖	Country 25	29 3			Florida Statutes Yes 10. Name and Address of New F	MNO
	9. Name and Address of Curre	ent Registered Agent	81 Na	 me	10. Name and Address of New F	iegistorea Agoni
EDANIK D	ONALD E		1 1	oot Add	ress (P.O. Box Number is Not Acceptat	tile)
FRANK, D	H AVE SOUTH		L. L.			
	ISBURG FL 33712		83			85 Zip Code
			* 84 Cit	•		FLUT
11. Pursuant to or registere familiar with	the provisions of Sections 607.05 d agent, or both, in the State of Flo n, and accept the obligations of, Sc	02 and 007.1508, Florida Statutes, orida. Such change was authorized action 607.0505, Florida Statutes.	the above name by the corporati	ed corpo on's boo	oration submits this statement for the pu and of directors. I hereby accept the app	irpose of changing its registered office pointment as registered agent. I am
l			Registered April Squ	anore resour	ord when rea stating.	DATE
12.	agnature. Spect or printed name of repretending OFFICERS A	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
TITLE	PVTS	☐ DEFETE	1 1 THLE			
NAME	FRANK, DONALD E 2934 60TH AVENUE SOUT	ч	1.2 NAME 1.3 STREEL ADD	RESS		
STREET ADDRESS CITY-ST-ZIP	ST PETERSBURG FL 33712	2	1.4 CHY - ST - ZII	- 1		Change Add-tion
TITLE		DELETE	2 1 TITLE			Citatile (2) Yasa-tan
NAME			2.2 NAME 2.3 STREET ADD	DECC		
STREET ADDRESS			2 4 CHY-S1-Zi			
CITY-ST-ZIP TITLE		DELETE	3 1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREEF AD	1		
CITY-ST-ZIP	DELETE		3.4 CITY - ST - ZIP 4.1 Title			☐ Change ☐ Addition
TITLE			4.2 NAME			
NAME STREET ADORESS			4.3 STREET AD	OHESS		
CITY-ST-ZIF		F1 65.53	4 4 C(1Y - ST - Z	16		Change Addition
TITLE		☐ DELEIF	5 1 TITLE 5 2 NAME			_
NAME			5 3 STREET AD	DRESS		
STREET ADDRESS			5.4 CITY - ST - 3	1		Characa Addition
CITY - ST - ZIP TITLE		☐ DELETE	6 1 TIFLE			Change Addition
	1		6.2 NAME	1		

6.4 CHY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and closs not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and I that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and I that my signature shall have the same legal effect as if made under certify 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

6.3 STREET ADDRESS

NAME

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR PRINTED NAME OF SIGNING OFFICER

CR2E034 (12/95)