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

**PROFIT** CORPORATION ANNUAL REPORT

1997

TITLE

STHEET ADDRESS



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F79535

(3)

Principal Place of Business Mailing Address  1801 SOUTH STATE ROAD 7 FT. LAUDERDALE FL 33317  GRAND TOURISMO CAR CENTER, INC.  Mailing Address  1801 SOUTH STATE ROAD 7 FT. LAUDERDALE FL 33317-6423								
		_			3. Date Incorporated or Qualified 04/29/1982	3a. Date 05/20		eport
2. Principal P	Place of Business	2a. Mailing Addr			4. FEI Number 59-2209588		· · · · ·	ptied For t Applicable
Suite, Apt.	#, etc	Suite, Apt. #,	etc.		5. Certificate of Status Desired		\$ <b>8.75</b> / Fee Re	
City & Stat	6	City & State			Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	May Be
Zip <b>24</b>	Country 25	Zip 29	30 Co	ountry		Yes 🔲	No	199.032,
	9. Name and Address of Curre	ent Registered Agent		81 Name	10. Name and Address of New R	egistered Ag	ent	
ROSELLI, LUIGI 1801 S. STATE ROAD 7 FT. LAUDERDALE FL 33317				82 Street Address (P.O. Box Number is Not Acceptable) 83				
11. Pursuant office or i agent. La		-			corporation submits this statement for the oration's board of directors. I hereby accor-	purpose of chept the appoin	SS Zip ( nanging it tment as	
12.	Signature, typed or printed name of registered a	ND DIRECTORS	INOTE: Registe		required when reinstating)  ADDITIONS/CHANGES TO OFF	DATE CERS AND D	RECTOR	S IN 12
TiTLE	PD	□ Di		TITLE			Change	Addition
NAME	ROSELLI, ENRICO		1.2	NAME				-
STREET ADDRESS	1801 S. STATE ROAD 7		1.3	STREET ADDRESS				j
COY-ST Za	FT. LAUDERDALE FL			CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		T	
Title	VPD	[]]		TITLE		L	] Change	☐ Addition
NAME STREET ADDRESS	ROSELLI, LUIGI 1801 S. STATE ROAD 7			NAME STREET ADDRESS				
CITY - \$1 - ZiP	FT. LAUDERDALE FL			CITY-ST-ZIP		•		ļ
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CITY-ST-7(P TITLE		□ D		CITY-ST-ZIP TITLE			Change	Addition
NAME				NAME		_		
STREET ADDRESS	:		4	STREET ADDRESS				ļ
C(1) Y + S1 - Z(P				CITY-ST-ZIP				

appears in Block 12 or Block 13 if changed, or on an attachment with ag **SIGNATURE:** 

DELETE

6.1 TITLE

6.2 NAME 6.3 STREET ADDRESS

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information and cated 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

**FILED** 

Apr 15 1997 8:00am

Secretary of State

Addition