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

Mailing Address

2a. Mailing Address

26

1801 SOUTH STATE ROAD 7

FT. LAUDERDALE FL 33317

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 DOCUMENT # F79535 1. Corporation Name

Principal Place of Business

1801 SOUTH STATE ROAD 7 FT. LAUDERDALE FL 33317

2. Principal Place of Business

21

GRAND TOURISMO CAR CENTER, INC.

Suite, Apt.	#, etc.	Suite, Apt. #, etc.					of Status Desire	ed 🗆	\$8.75 A	I
22		27							Fee Red	<u></u>
City & Stat	e	City & State				1	Campaign Financ	cing 🗆	\$5.00	
23	<u> </u>	28					d Contribution		Added to	Fees
Zip	Country	Zip	¬				oration owes the	current year In		
24	25 29 30					Personal Property Tax. 10. Name and Address of New Registered Agent				
	9. Name and Address of Current	Registered Agent		81		10. Name an	d Address of N	ew Registered	Agent	
DOCELLI TRIIO					Name					
ROSELLI, LUIGI 1801 S. STATE ROAD 7 FT. LAUDERDALE FL 33317				82	32 Street Address (P.O. Box Number is Not Acceptable)					
				_						
				83					•	
				84	City				85 Zip C	ode
					•		<i></i>	FL	- .L	
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										
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered .	Agent :	signature required v			DATE		
12.	OFFICERS ANI		13.			ADDITION	S/CHANGES TO	OFFICERS A		
TITLE	D DELETE			1.1 TITLE					Change	☐ Addition
NAME	ROSELLI, ENRICO			1.2 NAME			•			}
STREET ADDRESS	1801 S. STATE ROAD 7			1.3 STREET ADDRESS						
CITY-ST-ZIP	FT. LAUDERDALE FL			1.4 CITY-ST-ZIP			· · · · · · · · · · · · · · · · · · ·			
TITLE	VPD	☐ DELETE						-	Change	Addition
NAME	ROSELLI, LUIGI			2.2 NAME						· .
STREET ADDRESS				STREET ADDRESS			÷		}	
CITY-ST-ZIP				TY-ST-	- ZIP					
TITLE		☐ DELETE	3.1 TIT	LE.				:	Change	Addition
NAME			3.2 NA	MЕ						}
STREET ADDRESS			3.3 STI	REETA	DDRESS					1
C/TY-ST-ZIP	,		3.4. Cf	TY-ST	ZIP	• .				
TITLE		☐ DELETE	4.1 TIT		*:				Change	☐ Addition)
NAME			4. 2 NA	AME.			•		**	
STREET ADDRESS			4 3 ST	REETA	ADDRESS					
CITY-ST-ZIP			4 4 CIT	ry-st-	ZIP					- 1
TITLE		DELETE	5.1 TII						Change	Addition
NAME		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	5.2 NA	ME			. '-	1.	•	:
STREET ADDRESS			5.3 STI	REETA	ADDRESS		A		;	
CITY-ST-ZIP		••	5.4 CIT	Y-ST-	ZIP					.
TITLE		☐ DELETE	6.1 TIT	Œ	—·				Change	Addition
NAME	· ·	<u> </u>	6.2 NA	ME				· /		
STREET ADDRESS			6.3 STI	REETA	ADORESS					}
			6.4 CIT			•				}
CITY-ST-ZIP	Lending that the information supplied wit	this filing does not qualify for the				ection 119.07(3))(i), Florida Statu	ites. I further ce	ertify that the in	nformation

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 eath; that I am ar 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, with all other like empowered.

SIGNATURE:

CR2E034 (11/98)

FILED

Mar 04, 1999 8:00 am Secretary of State

03-04-1999 90268 002 ***150.00

DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date incorporated or Qualifed

04/29/1982

59-2209588

4. FEI Number