FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAY -1 AM 9:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # H09073 (8)

1. Corporate Name
GTA DESIGN GROUP, INC.

Principal Office Address
333 S. TAMIAMI TR., STE. 25X
VENICE FL 34285

Mailing Address
333 S TAMIAMI TR., STE. 25X
VENICE FL 34285

DO NOT WRITE IN THIS SPACE

3. Date of Incorporation (Month/Day/Year): 06/22/1984
3a. Date of Last Report: 03/14/1994

2. Principal Place of Business
21
Suite, Apt. #, etc.: 22 309
City, State: 23
24 25

2a. Mailing Address
26
Suite, Apt. #, etc.: 27 309
City, State: 28
29 30

4. FEI Number: NOT APPLICATION — Applied For / Not Applicable

5. Certificate of Status Desired [ ] $8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [ ] $5.00 May Be Added to Fees

8. Does corporate bank, be changed to Florida? [X] Yes [ ] No

9. Name and Address of Current Registered Agent
GAUS, TIMOTHY
333 S TAMIAMI TRAIL, STE 257
VENICE FL 34285

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City: FL 85 Zip Code

11. Having been designated to accept service of process for the above named corporation, at the place designated in this statement, I hereby accept the appointment as registered agent and am familiar with and accept the obligations of my position as registered agent.

Signature: Tim Gaus TIMOTHY GAUS 4-15-95

12. Officers and Directors

P
GAUS, TIMOTHY
333 S. TAMIAMI TRAIL
VENICE FL

V
TAN, VICTOR
333 S. TAMIAMI TRAIL
VENICE FL

13. Additions/Changes to Officers and Directors

VICE PRESIDENT [X] Change [ ] Add
SAME

PRESIDENT [X] Change [ ] Add
SAME

14. I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same force and 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 Florida Statutes; and that my name appears above, or on an attachment with all other like empowered officers and directors, as they appear on the records of the corporation or its successor or the receiver or trustee.

SIGNATURE: Tim Gaus 4-15-95 (407) 539-2882
DOCUMENTS AND FILING FEE MUST BE SIGNED BY OFFICER OR DIRECTOR
TIMOTHY GAUS

0345067 CP