

2009 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L02000018259

FILED
Sep 17, 2009
Secretary of State

Entity Name: GTG INVESTMENT LIMITED COMPANY

Current Principal Place of Business:

4401 NE 2ND AVE
DEERFIELD BEACH, FL 33064 US

New Principal Place of Business:

945 SW 8 STREET
HALLANDALE BEACH, FL 33009 US

Current Mailing Address:

4401 NE 2ND AVE
DEERFIELD BEACH, FL 33064 US

New Mailing Address:

945 SW 8 STREET
HALLANDALE BEACH, FL 33009 US

FEI Number: 16-1620414 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FERNANDES, LAURENCE PD
4401 NE 2ND AVE
DEERFIELD BEACH, FL 33064 US

Name and Address of New Registered Agent:

ALCINDOR, LAURENCE PD
945 SW 8 STREET
HALLANDALE BEACH, FL 33009 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: LAURENCE ALCINDOR

09/17/2009

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: PD () Delete
Name: FERNANDES, LAURENCE PD
Address: 4401 NE 2ND AVE
City-St-Zip: DEERFIELD BEACH, FL 33064 US

ADDITIONS/CHANGES:

Title: PD (X) Change () Addition
Name: ALCINDOR, LAURENCE PD
Address: 945 SW 8 STREET
City-St-Zip: HALLANDALE BEACH, FL 33009 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: LAURENCE ALCINDOR

PD

09/17/2009

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date