## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 04, 2005 08:00 AM Secretary of State

DOCUN 1. Entity Name G.A.T.S., I		5571				Secr	etary of S	raic
Principal Place	of Business	Mailing Address		<del>'</del>				
816 SW 51ST CAPE CORAL,	TERR	816 SW 51ST TERR CAPE CORAL, FL 339	014					
2. Principal Pla	ace of Business	3. Mailing Address	-	-				
Suite, Apt. i	#, etc	Suite, Apt. #, etc.		<del></del>	04182005	Chg-P	CR2E034 (10/0	3)
City & State	)	City & State			4. FEI Number 65-1066			Applied For Not Applicable
Zip	Country	Zip	Coun	ntry		of Status Desired	□ \$8.75 / Fee Requ	
	6. Name and Address of Current	Registered Agent		N	7. Name and	Address of New F	Registered Agent	
MDIGHT (	CHRISTINE F			Name				
1105 CAPE	E CORAL PKWY E STE C RAL, FL 33904			Street Add	iress (P.O. Box Numbe	r is Not Acceptable	e) .	
				City	4		FL Zip C	ode
	named entity submits this statement f			1 22		2 3 800 2 2	<del></del>	90 A
the obligati	ions of registered agent.  Signature, typed or printed name of registered agen	t and title if applicable (N	OTE, Registére	ed Agent signature	required when reinstating)		DATE	·
the obligati	Signature, typed or printed name of registered agen E NOWIII FEE IS \$150.00 ay 1, 2005 Fee will be \$550	9. Election Camp Trust Fund Co	oaign Fina	incing	\$5.00 May Be Added to Fees			
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indicated on this report or supplemental 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 appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

ID TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRE

04.29.05 239-671-6066