

3/1

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000573983

1. Entity Name

GTG Wholesalers Inc.

FILED
Apr 25, 2001 8:00 am
Secretary of State

03-19-2001 90494 040 ***150.00

Principal Place of Business Mailing Address

9000 Sheridan Street #134
Pensacola, FL 33024

2. Principal Place of Business

11860 W. State Road 84

Suite, Apt. #, etc.

Suite B6

City & State

DAVIE, FL

3. Mailing Address

11860 W. State Rd. 84

Suite, Apt. #, etc.

Suite B6

City & State

DAVIE, FL

4. FEI Number

65-1030031

Applied For

Not Applicable

5. Certificate of Status Desired ☐\$8.75 Additional
Fees Required

6. Name and Address of Current Registered Agent

Joseph J. Huss
1946 TYLER STREET
Hollywood, FL 33020

7. Name and Address of New Registered Agent

Name: Wayne Feuerherm
Street Address (P.O. Box Number is Not Acceptable): 15703 SW 16 ST.
City: DAVIE FL Zip Code: 33326

8. 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: X Wayne Feuerherm, Wayne Feuerherm, Pres.

3.12.01

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00

After MAY 1, 2001: Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE: President
NAME: Wayne Feuerherm
STREET ADDRESS: 15703 SW 16 ST.
CITY-STATE-ZIP: DAVIE, FL. 33326 ☐ DeleteTITLE: Vice President
NAME: Latitia Feuerherm
STREET ADDRESS: 15703 SW 16 ST.
CITY-STATE-ZIP: DAVIE, FL. 33326 ☐ DeleteTITLE: ☐ Delete
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CITY-STATE-ZIP: ☐ Delete

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ AdditionTITLE: ☐ Change ☐ Addition
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NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-STATE-ZIP: ☐ Change ☐ Addition

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: X Wayne Feuerherm, Wayne Feuerherm, 3.12.01

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E034 (1/1/00)