

2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P01000101507

FILED
Apr 15, 2002 8:00 AM
Secretary of State

Entity Name: GTV ENTERPRISES, INC.

Current Principal Place of Business:

4141 COLLINS AVENUE UNIT 409
MIAMI BEACH, FL 331403244

New Principal Place of Business:

4141 COLLINS AVENUE UNIT 409
MIAMI BEACH, FL 331403244 US

Current Mailing Address:

4141 COLLINS AVENUE UNIT 409
MIAMI BEACH, FL 331403244

New Mailing Address:

4141 COLLINS AVENUE UNIT 409
MIAMI BEACH, FL 331403244 US

FEI Number: 65-1146609

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPIEGEL & UTRERA, P.A.
1840 SW 22ND ST.
4TH FLOOR
MIAMI, FL 33145 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PTD () Delete
Name: GONCALVES, EDISON
Address: 4141 COLLINS AVENUE UNIT 409
City-St-Zip: MIAMI BEACH, FL 331403244

Title: SVD () Delete
Name: ROLFO, FABIO
Address: 4141 COLLINS AVENUE UNIT 409
City-St-Zip: MIAMI BEACH, FL 331403244

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FABIO ROLFO

SVD

04/15/2002

_____ Electronic Signature of Signing Officer or Director

_____ Date