

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 31, 2003 8:00 am
Secretary of State

01-31-2003 90143 011 ***150.00

DOCUMENT # P02000051831

1. Entity Name
GPT CORP.



Principal Place of Business

~~8573 NW 72ND STREET~~
~~MIAMI FL 33166~~

Mailing Address

~~8573 NW 72ND STREET~~
~~MIAMI FL 33166~~

2. Principal Place of Business

7801 NW 37TH STREET

3. Mailing Address

7801 N.W. 37TH STREET

Suite, Apt. #, etc.

SUITE # 201

Suite, Apt. #, etc.

SUITE # 201

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33166

Country

USA

Zip

33166

Country

USA



☐ CHECK HERE IF MAKING CHANGES

4. FEI Number

81-0552690

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

~~ISICOFF RAGATZ & KOENIGSBERG, P.A.~~
~~1101 BRICKELL AVENUE SUITE 800~~
~~SOUTH TOWER~~
~~MIAMI FL 33131~~

7. Name and Address of New Registered Agent

Name

MENDOZA, EDUARDO

Street Address (P.O. Box Number is Not Acceptable)

7801 NW 37TH STREET SUITE #201

City

MIAMI

FL

Zip Code

33166

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Eduardo Mendoza
Eduardo Mendoza

1-27-03

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00

After May 1, 2003 Fee will be \$550.00

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution.

☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MENDOZA, EDUARDO**
STREET ADDRESS ~~8573 NW 72ND STREET~~
CITY-ST-ZIP ~~MIAMI FL 33166~~

TITLE **D** ☐ Delete
NAME **CHINEA, OSCAR**
STREET ADDRESS ~~8573 NW 72ND STREET~~
CITY-ST-ZIP ~~MIAMI FL 33166~~

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **D** ☒ Change ☐ Addition
NAME **MENDOZA, EDUARDO**
STREET ADDRESS **7801 NW 37TH STREET SUITE #201**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE **D** ☒ Change ☐ Addition
NAME **CHINEA, OSCAR**
STREET ADDRESS **7801 N.W. 37TH STREET SUITE #201**
CITY-ST-ZIP **MIAMI, FL 33166**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Eduardo Mendoza
Eduardo Mendoza

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-03 786 803 4882

Date

Daytime Phone #

CR2E034 (10/02)