


**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**


FILED
Mar 08, 2006 08:00 AM
Secretary of State

DOCUMENT # P02000101867
1. Entity Name
GRAN TOURISMO, U.S.A., INC.



Principal Place of Business Mailing Address
8401 PINION DRIVE 8401 PINION DRIVE
LAKE WORTH, FL 33467 LAKE WORTH, FL 33467

U0001U459104
03/18/06-80014-016 150.00



DO NOT WRITE IN THIS SPACE

01242006 No Chg-P CR2E034 (11/05)

4. FEI Number Applied For
05-0531594 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

PHILLIPS, JACK B
2501 BRISTOL DRIVE
B-3
WEST PALM BEACH, FL 33409

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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 _____ DATE _____
Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

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

10. OFFICERS AND DIRECTORS

TITLE	PT
NAME	GYSBERTSEN, JAN G
STREET ADDRESS	8401 PINION DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	S
NAME	GYSBERTSEN, GLORIA
STREET ADDRESS	8401 PINION DRIVE
CITY-ST-ZIP	LAKE WORTH, FL 33467
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  Date: 2/23/2006 Daytime Phone # _____
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR