2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 04, 2005
Secretary of State

DOCUMENT# P04000047279

Entity Name: GTS HOLDINGS, INC.

Current Principal Place of Business:

9505 NW 42ND STREET
SUNRISE, FL 333517614 US

New Principal Place of Business:

Current Mailing Address:

9505 NW 42ND STREET
SUNRISE, FL 333517614 US

New Mailing Address:

FEI Number: 20-0875619 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ARBEITER, HARLEN
9505 NW 42ND STREET
SUNRISE, FL 333517614 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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PST ( ) Delete
Name: ARBEITER, HARLEN
Address: 9505 NW 42ND STREET
City-St-Zip: SUNRISE, FL 333517614 US

Title: CEO ( ) Delete
Name: TRAN, TUAN
Address: 4446 NW 113 TERRACE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: CIO ( ) Delete
Name: WHITE, ANTONIO P
Address: 11000 MIDDLE GOLF COURT
City-St-Zip: TAMARAC, FL 33321 US

Title: COO ( ) Delete
Name: KAYE, BAYLA
Address: 8831 SOUTHERN ORCHARD ROAD SOUTH
City-St-Zip: DAVIE, FL 33328 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: HARLEN ARBEITER PST 08/04/2005

Electronic Signature of Signing Officer or Director Date