

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P92000005110

1. Entity Name

GROUND TURBINE TECHNOLOGY CORPORATION

FILED
Apr 11, 2000 8:00 am
Secretary of State

04-11-2000 90170 024 ***150.00

Principal Place of Business

~~100 NORTH BISCAYNE BLVD.~~
~~21ST FLOOR~~
~~MIAMI FL 33132~~

Mailing Address

~~100 NORTH BISCAYNE BLVD.~~
~~21ST FLOOR~~
~~MIAMI FL 33132-2304~~

2. Principal Place of Business

c/o Miller & Webner, PA

Suite, Apt. #, etc.

P.O. Box 266947

City & State

Weston, FL

Zip

33326-6947

Country

USA

3. Mailing Address

c/o Miller & Webner, PA

Suite, Apt. #, etc.

P.O. Box 266947

City & State

Weston, FL

Zip

33326-6947

Country

USA



DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0372964

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

REBECCA M. MILLER
21ST FLOOR, NEW WORLD TOWER
100 NORTH BISCAYNE BLVD.
MIAMI FL 33132

7. Name and Address of New Registered Agent

Name
Rebecca M. Miller
Street Address (P.O. Box Number is Not Acceptable)
c/o Miller & Webner, P.A.
2442 Poinciana Court
City Weston FL Zip Code 33327

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

Rebecca M. Miller *Rebecca M. Miller* 3/17/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 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, 2000 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	D	<input type="checkbox"/> Delete
NAME	MONTALVO, JOHN	
STREET ADDRESS	100 N. BISCAYNE BLVD., 21ST FLOOR	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	GRIESEMER, RUSS	
STREET ADDRESS	100 N. BISCAYNE BLVD., 21ST FLOOR	
CITY-ST-ZIP	MIAMI FL 33132	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	c/o Miller & Webner, P.A.	
STREET ADDRESS	2442 Poinciana Court	
CITY-ST-ZIP	Weston, FL 33327	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
John Montalvo, Director

4/4/00

(954) 385-9030

Date

Daytime Phone #

CR2E034 (9/99)