## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P93000021516 1. Corporation Name

GTM SALES, INC.

Mailing Addrson

## **FILED** Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90074 022 \*\*\*150.00



Principal Place	or Business	Maning Address					
223 WIMBLEDO		223 WIMBLEDON LAKE DR. PLANTATION FL 33324					
				L		IN THIS SPACE	
					ate Incorporated or Qualifed		
				0	3/18/1993		
2. Principal Pl	ace of Business	2a. Mailing Address		4. F	El Number		Applied For
3067	Windens Pal	ما المروق	$\sim 2a$ .	6	5-0393724	[-]	Not Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.				<u></u> \$8.7	5 Additional
	W1 010.			5. C	ertifcate of Status Desired	1 1	e Required
22 State		27 City & State	*	. 6 5	lection Campaign Financing	¢5:	00 May Be
- Dity's Stat	Cartaca II		andens i	<b>-1</b> 1 !	rust Fund Contribution	1 1	led to Fees
23 LOLYN	Deach Couries 11	MIND Dancy G	Country				100 10 1 000
da	Country	- 22 LI A -		I	his corporation owes the currer	nt year intangible Yes	□No
24 5341	25 5 5	29 <b>3341</b> <i>0</i> 30			ersonal Property Tax. lame and Address of New Re		
	9. Name and Address of Current I	Registered Agent	Od Nome	10. N	ame and Address of New Re	Igistered Agent	
DED	DINCTON CLEMN D		81 Name	(al-av	nn K. Ked	dinator	<b>a</b>
REDDINGTON, GLENN R				Address (P.C	). Box Number is Not Acceptab		
223_WIMBLEDUŅ LAKE DR.				2267	Windsor	Koaa	
PLAN	NTATION FL 33324		83			, ,	
			24 00		<del> </del>	los I	Zin Cada
	• ,		84 C	Im Ka	note Edulans	· FL Pola	行立プカー
11 Durauant	to the provisions of Sections 607.0502	and 607 1508 Florida Statutes.	the above-named	corporation s	submits this statement for the p	urpose of changing	g its registered
office or re	egistered agent, or both, in the State of maillar with, and accept the obligation	Florida, Such change was auth	orized by the corbo	oration's boar	d of directors. I hereby accept	the appointment a	s registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE							
12.	OFFICERS AND		13.	AD	DITIONS/CHANGES TO OFFI	ICERS AND DIRE	CTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			(Char	nge 🔲 Addition
NAME	REDDINGTON, GLENN R		1.2 NAME		_	_	}
· - \	223 WIMBLEDON LAKE DR.		1.3 STREET ADDRESS	2017	windson Ra	ool .	}
STREET ADDRESS	PLANTATION FL	•		820	No and	لت ويد	SSHID
CITY-ST-ZIP		☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	kertus-	Depart Gares	Char	nge 🗀 Addition
TITLE	VD	D DECE IE				**	gv
NAME	BEVERLY M REDDINGTON		2.2 NAME	-010	water lear Do	امما	ļ
STREET ADORESS	223 WIMBLEDON LAKE DRIVE		2.3 STREET ADDRESS	2061	WINDISET FO	· · ·	n
CITY-ST-ZIP	PLANTATION FL		2.4 CITY-ST-ZIP	Valm	15 each Go	Mans, a	1 3540
TITLE -	The same of the sa	DELETE 1	3.1 TITLE	. U 2755 *		· [_]*Char	nge 🗌 Addition
NAME	Y		3.2 NAME				
STREET ADDRESS			3.3 STREET ADDRESS		•		ſ
CITY-ST-ZIP	green 1		3.4. CITY-ST-ZIP		, .		
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NAME							ļ
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NAME			5.2 NAME				1
STREET ADDRESS			5.3 STREET ADDRESS				l
CITY-ST-ZIP	•		5.4 CITY-ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE			☐ Cha	nge
NAME			6.2 NAME	}			
			6.3 STREET ADDRESS				ļ
STREET ADDRESS			64 CITY-ST-ZIP				

with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ital annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an ceive or tustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 14. I hereby certify that they indicated on this annual officer or director of the Block 12 or Block 13 to