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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northing
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 30 AM 9:18

DOCUMENT # P93000040171 (9)

1. Corporation Name
GTN CORP.

Principal Place of Business

2400 WEST CYPRESS CREEK ROAD
SUITE 205
FORT LAUDERDALE FL 33309
US

Mailing Address

2400 WEST CYPRESS CREEK ROAD
SUITE 205
FORT LAUDERDALE FL 33309
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/01/1993

3a. Date of Last Report
08/17/1994

4. FEI Number
65-0418956

Applied For
Not Applicable

5. Certificate of Status Desired

☒

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under S. 193.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

21. Suite, Apt. #, etc.

2a. Mailing Address

26. Suite, Apt. #, etc.

22. City & State

27. City & State

23. Zip

Country

28. Zip

Country

24. Zip

Country

29. Zip

Country

9. Name and Address of Current Registered Agent

BRYN, MARK (ESQ.)
444 BRICKELL AVENUE
SUITE 750
MIAMI FL 33309

10. Name and Address of New Registered Agent

81. Name
Manuel Avila, Esq.
82. Street Address (P.O. Box Number is Not Acceptable)
2250 S.W. 3rd Ave., 5th Floor
83. City
Miami, FL 85. Zip Code
33129

11. Pursuant to the provisions of Sections 607.0502 and 607.1500, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Manuel Avila

Manuel Avila, Esq.

6/22/95

(Signature must be printed name of registered agent or officer or director)

(Signature must be printed name of registered agent or officer or director)

(Date)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY, ST, ZIP
V	DUNNE SR., GERALD M.	2400 WEST CYPRESS CREEK ROAD, SUITE 205 FORT LAUDERDALE FL	
DST	OTTENS, WILLIAM ERIC	2400 W. CYPRESS CREEK ROAD, SUITE 205 FORT LAUDERDALE FL	
DV	DUNNE, EDWARD P.	2400 W. CYPRESS CREEK ROAD, SUITE 205 FORT LAUDERDALE FL	
D	DUNNE JR., GERALD M.	2400 W. CYPRESS CREEK ROAD, SUITE 205 FORT LAUDERDALE FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY, ST, ZIP
P/D	DUNNE SR., GERALD M.	2400 W. CYPRESS CREEK RD., SUITE 205 FORT LAUDERDALE, FL	
S/T/D	OTTENS, WILLIAM ERIC	2400 W. CYPRESS CREEK RD., SUITE 205 FORT LAUDERDALE, FL	
No Change	DUNNE, EDWARD P.	2400 W. CYPRESS CREEK RD., SUITE 205 FORT LAUDERDALE, FL	
Resigned	DUNNE JR., GERALD M.	2400 W. CYPRESS CREEK RD., SUITE 205 FORT LAUDERDALE, FL	
D	MAC GREGOR, MURDOCK	2400 W. CYPRESS CREEK RD., SUITE 205 FORT LAUDERDALE, FL	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 193.032(a)(1), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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 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 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Edward P. Dunne

Edward P. Dunne

6/26/95

(305) 491-7200

(Signature must be printed name of officer or director)

(Date)

(Number of Shares)