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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P

1998

P95000007715 (2)

GT'S CONTRACTING SERVICES, INC.

FILED Jan 23 1998 8:00am Secretary of State



Principal Place of Business Mailing Address					1 19911991 (19 1019) 01111 00111 00111 00111 00111	1,00.00.00.00.00.00.00.00.00.00.00.00.00.		
17225 GREEN TURTLE LANE EAST 17225 GREEN TURTLE LAN SUGARLOAF FL 33042 SUGARLOAF FL 33042				NE EAST				
						DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified		
6 Dalasia et Di	and Divisions	2a. Mailing Address				01/30/1995 4. FEI Number	oplied For	
-	ace of Business	H	Hi "				ot Applicable	
21 Suite, Apt.	W ata	Suite Ant # etc	Suite, Apt. #, etc.			¢0.75	Additional	
22	, (i c.	27				E Continente of Status Decired	equired	
City & State)	City & State				6. Election Campaign Financing \$5.00	May Be	
23		28					to Fees	
Zip	Country	Zip				8. This corporation owes or has paid the current year In	langible	
24	25	29	30			Personal Property Tax due June 30. Yes] No	
	9. Name and Address of Curre	nt Registered Agent		ļ		10. Name and Address of New Registered Agent		
GADOMSKI, TOMASZ				81	Name			
17	1225 GREEN TURTLE LANE EAS	ST		82 Street Add		dress (P.O. Box Number is Not Acceptable)		
S	JGARLOAF FL 33042							
				83				
				84	City	FL 85 Zip	Code	
11 Pursuant to the provisions of Sections 607 0502 and 607 1508 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register.								
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 Signature, typed or printed name of registered agent and titri if applicable (NOTE Registered Agent signature required when reinstating) DATE								
				a Age	ni signature requ	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	RS IN 12	
TITLE	P DELETE			13.		Change	Addition	
NAME	GADOMSKI, THOMASZ		1.2 N			·	_	
STREET ADDRESS	17225 GREEN TURTLE LN.	F			ADDRES\$			
CITY-ST-ZIP	SUGARLOAF FL 33042	· -		ITY-S'				
TITLE	S	DELETE		2.1 TITLE		Change	☐ Addition	
NAME	GADOMSKI, KATARYNE		2.2 N	AME				
STREET ADDRESS	17225 GREEN TURTLE LN.	Е	235	2 3 STREET ADDRESS			ļ	
CITY-ST-ZIP	SUGARLOAF FL 33042		2 4 0	HTY-S	ST - ZIP			
TITLE		☐ DELETE	3 1 T)	TLE		☐ Change	☐ Addition	
NAME			3.2 N	AME				
STREET ADDRESS			335	TREET	ADDRESS			
CITY-ST-ZIP			3 4. 0	3 4. City-St-ZiP				
TITLE	☐ DELETE 4			4.1 THILE		☐ Change	Addition	
NAME			4.2 N	IAME				
STREET ADDRESS			4.3 S	TREET	ADDRESS			
CITY-ST-ZIP		Distress		ITY-S	1 - ZIP	Λ	- Andrian	
TITLE				TLE	,	Change Addition		
NAME			5 2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP	···	COLUMN		ITY - S	1 - ZIP	Change	Addition	
TITLE		DELETE	6.1 TI			□ Change	☐ MOUITON	
NAME			6.2 N					
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4 C	ITY-S	I-ZIP			

14. Thereby 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 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 on an attachment with an address.

CIGNATURE VICANIAN