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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000060052 (4)

GT INVESTMENT CORP. OF SOUTH FLORIDA Principal Place of Business Mailing Address 150 NORTHWEST 108TH TERRACE 150 NORTHWEST 108TH TERRACE PEMBROKE PINES FL 33026 PEMBROKE PINES FL 33026-5120 3 Pate Incorporated or Qualified 9. Date of Last Report

**FILED** Jan 17 1997 8:00am Secretary of State



					22/1996
2, Principal Pla	ace of Business	2a, Mailing Address		4. FEI Number	Applied For
21 5311			82°0 Terr.	65-0618184	Not Applicable
Suite, Apt #	¥, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
	UDERDALE, FL	28 FT LAVOERO	ALE. FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Countre	Zio	Courte	This correction has liability for intensible	
24 333	31 25 BROWARD	29 33331 3	BROWA	KO Florida Statutes ☐ Yes	No No
	9. Name and Address of Current	10. Name and Address of New Registered	Name and Address of New Registered Agent		
150 l	CANIO, TERRI K N.W. 108TH TERRACE, #103 BROKE PINES FL 33026		81 Name TERRI K. D'ASCANIO  82 Street Address (P.O. Box Number is Not Acceptable)  5311 Sw 182 Terr.  83		
			84 City	T LAUDERDALE FL	85 Zip Code 3333)
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 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. Lam familiar with, and accept the obligations of, Section 607,0505, Florida Statutes.  SIGNATURE  Signification bytes of partical range of registered agent agent agent agent for it applicable. (NOT). Registered Agent signature required when reinstating).  DATE					
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PSTD	DELETE	1.1 TITLE	PSTD	Change
NAME	D'ASCANIO, TERRI K		1.2 NAME	TERRI K. D'ASCANIO	·
STREET ADDRESS	150 NORTHWEST 108TH TERRA	CE	1.3 STREET ADDRESS	5311 SW 1822A	
CITY-ST-ZIP	PEMBROKE PINES FL 33026		1.4 CITY - ST - ZIP	FT LAUDERDALE, FL 33026	
TITLE		DELETE	2.1 TITLE	**************************************	Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CITY - ST - ZIP			2 4 DITY-ST-ZIP		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
- CITY - \$1 - ZIP			34. CITY - ST - ZIP		
TITLE		DELETE	4 1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CrTY - ST - ZIP			4.4 CITY - ST - ZIP		
TITLE		L_J DELETE	5.1 TITLE		Change Addition
-NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
,CITY - ST - ZIP			5 4 CITY-ST-ZIP		
TITLE		L] DELETE	6.1 TITLE		Change Addition
NAME			6 2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - S1 - ZIP		
<b>14.</b>   do hereb	by certify that the information supplied	with this filing does not qualify.	for the exemption s	tated in Section 119.07(3)(i), Florida Statutes. I furthe	er 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 attachmort with an address.

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