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

PROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS **FILED**

Mar 23 1998 8:00am

Secretary of State

DOCUMENT # P96000054396 (2)

GT ENTERPRISES OF TAMPA, INC.

| Principal Place of Business | | Mailing Address | | a tabunda ira tasa anun anun anun anun anun anun atun atu | |
|---|---|---|--|--|--|
| 7117 N ARMENIA AVE B TAMPA FL 33604 US | | 12103 THOMASVILLE CIRC | LE APT D | DO NOT WRITE IN THIS SPACE | |
| | | TAMPA FL 33617 | | | |
| | | | | 3. Date Incorporated or Qualified | |
| ** | | | | 06/24/1996 | |
| 2. Principal Place of Business | | 2a. Mailing Address | _ | 4. FEI Number Applied For | |
| 21 | | 26 2503 VICTARS | UA CIRCLE | 59-3386351 Not Applicable | |
| Suite, Apt. #, etc | | Suite, Apt. #, etc. | | \$8.75 Additional | |
| 22 | | 27 | | Fee Required | |
| City & State | | City & State | | 6. Election Campaign Financing \$5.00 May Be | |
| 23 | | 28 LUTZ, FL | 0 | Trust Fund Contribution L Added to Fees | |
| Zip | Country | 20 33549-370 | Country 30 U.S.A | 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ▼ Yes □ No | |
| 24 | 25 g. Name and Address of Cu | 150 | 30 4.7. | 10. Name and Address of New Registered Agent | |
| 250 | | arront riogrator of Agont | 81 Name | <u> </u> | |
| | GES, GEORGES | | | derbes, Georges | |
| 13103 THOMASVILLE CIRCLE APT E | | PTD | 82 Street Addre | ess (P.O. Box Number is Not Acceptable) 3 VICTARFA CIFCLE | |
| I PONT | P A FL 338 17 | | 83 | 5 VICIARIA CIRCO | |
| | | | | | |
| | | | 84 City LUT | FL 85 Zip Code 33549 | |
| 11 Pursuant tr | the provisions of Sections 607 | 2 0502 and 607 1508 Flooda Statute | s the above-named corn | oration submits this statement for the purpose of changing its registered | |
| office or re | gistered agent, or both, in the S | State of Florida. Such change was a | ithorized by the corporati | on's board of directors. I hereby accept the appointment as registered | |
| | ramiliar with, and accept the c | | | al. log | |
| SIGNATURE | to the Wood of for led came of hydren | Managed life of applicable (NOTE | GES GERGES Rugistered Agent signature require | 3/16/59 od when reinstating) DATE | |
| 12. | | AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| Title | Ρ | DELETE | 1.1 TITLE D | Change [] Addition | |
| NAME | GERGES, GEORGES | | 1.2 NAME GE | res, Georges | |
| STREET ADDRESS | 19109 THOMASVILLE CIR | CLE APT- D | 1.3 STREET ADDRESS 25 | 03 VICTARRA CIRCIE | |
| City-St-Zie | TAMPA FL 93617 | | 1.4 CHTY-ST-ZIP | TZ, FL 33549 | |
| TITLE | ٧ | DELFTE | 2 1 1ITUF | | |
| NAME | GERGES, TRACY | | 22 NAME GE | ERGES, TRACY 103 VICTAERA CIRCIE | |
| STREET ADDRESS | 13103 THOMASYILLE CIR | GLE-APT-D | | | |
| CITY - ST - ZIF | TAMPA FL 33617 | | 2.4 CITY-ST-ZIP W | TB, PL 33549 | |
| TITLE | | DELETE | 3.1 11flE | Change Addition | |
| NAME | | | 3.2 NAME | | |
| STREET ADDRESS | | | 3.3 STREET AODRESS | | |
| CHY-ST ZIP | | | 3 4. CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | Change [_] Addition | |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| CITY-ST-ZIP | | T Street | 4.4 CITY-ST-7IP | District Change | |
| TITLE | | [] DETELF | 5.1 THTLE | Change Addition | |
| NAME | | | 5.2 NAME | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CHY-S1-ZIP | | T prices | 5.4 CITY-ST-ZIP | ☐ Change ☐ Addition | |
| TITLE | | L_J DELETE | 6.1 TITLE | Change J Adollion | |
| NAME | | | 6.2 NAME | | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | |
| CITY-S1-ZIP | at the theat they make a section to the | and with their filters along and something | the exemption stated in | Section 119.07(3)(i), Florida Statutes. I further certify that the information | |
| indicated o officer or d | o this annual report or supplien | nental annual report is true and accu receiver or trustee empowered to e | rate and that my signatur | re shall have the same legal effect as if made under oath; that I am an irred by Chapter 607, Florida Statutes; and that my name appears in | |