2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P97000019159

1. Entity Name GPT CORPORATE MANAGEMENT, INC.



FILED Mar 29, 2007 08:00 AM Secretary of State

Principal Place of Business

Mailing Address

2025 NW 102ND AVE #105 MIAMI, FL 33172 US

2025 N.W. 102ND AVE MIAMI, FL 33172



DO NOT WRITE IN THIS SPACE

03262007	No Chg-P	CR2E034 (11/05)

Applied For 4. FEI Number 65-0750060 Not Applicable \$8.75 Additional 5. Certificate of Status Desired

Fee Required

KLEIN, STEVEN C

6. Name and Address of Current Registered Agent

11776 W. SAMPLE RD STE. 105 POMPANO BEACH, FL 33065

DO NOT WRITE IN THIS SPACE

		·			
8. The above the obligat	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	ed office or	registered agent, or bot	h, in the State of Florida. I am familiar with, and accept
SIGNATURE.	Signature, typed or printed name of registered agent and title	of applicable (NOTE; Registered	d Agent signatur	e required when reinstating)	DATE
FIL After M	E NOWIII FEE IS \$150.00 ay 1, 2007 Fee will be \$550.00	9. Election Campaign Finan Trust Fund Contribution.	cing	\$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	CTORS	<u> </u>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PAOLO DEZI 2025 NW 102ND AVE #105 MIAMI, FL 33172				
TITLE NAME STREET ADDRESS CITY-S1-ZIP	SD TONY DEZI 2025 NW 102ND AVE #105 MIAMI, FL 33172			U00000681841 04/04/07-80061-022 150.0	
TITLE NAME STREET ADDRESS CITY-SI-ZIP				DO	NOT WRITE
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			:		
TITLE NAME STREET ADDRESS					

12. Thereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP

PHOT

03-26-2007

305-392-5508