2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P97000067550

Entity Name: GVR CORPORATION

FILED Apr 10, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
	TUGA LANE I BEACH, FL 3	3436					
Current Mailing Address:				New Mailing Address:			
	TUGA LANE I BEACH, FL 3	3436					
FEI Number:	65-0790300	FEIN	umber Applied For() F	El Number Not Appli	cable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
	CHARD TUGA LANE I BEACH, FL 3	3436	US				
	named entity s of Florida.	ubmits	s this statement for the purp	ose of changing it	s registered of	fice or registered agent, or both,	
SIGNATUR	RE:						
	Electron	ic Sign	ature of Registered Agent			Date	
Election Can	onaign Financing	ı Trust F	Fund Contribution ()				
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	DTP () VITALE, RICHAI 8118 TORTUGA BOYNTON BEA	LANE	33436	Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VPS () VITALE, EUGEN 8118 TORTUYA BOYNTON BEA	LANE	33436	Title: Name: Address: City-St-Zip:	VPS (X) VITALE, EUGEN 8118 TORTUGA BOYNTON BEAG	LANE	
Title: Name: Address: City-St-Zip:	VP () VITALE, JEAN N 8118 TORTIGA BOYNTON BEA	LANE	33436	Title: Name: Address: City-St-Zip:	VP (X) VITALE, JEAN M 8118 TORTUGA BOYNTON BEAG	LANE	
Title: Name: Address: City-St-Zip:	VP () CULLEN, JAME 26 DOVER DRIV WALPOLE, MA	/E		Title: Name: Address: City-St-Zip:	()	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: RICHARD VITALE DTP 04/10/2003