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

CORPORATION ANNUAL REPORT 1000



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jun 09 1998 8:00am Secretary of State

DOCUMENT # P97000080328 (2)						
GRTP,	INC.					
Principal Place of Business Mailing Address			Iress			T TOBATORIA TION TOBAT BOATH BOTTA BOTTA BOTTA BOTTA BOTTA BOTTO BATTA FIRMA FIRMA FIRMA FIRMA
1101 NORTH MAITLAND FL	LAKE DESTINY DRIVE #400	1101 NORTH LAKE DESTINY DRIVE #400 MAITLAND FL 32751			400	
WALL DAVID I'E	<u> </u>	MAILENIE	1 6 02/31			DO NOT WRITE IN THIS SPACE
						3. Date incorporated or Qualified 09/16/1997
2. Principal Pl	ace of Business	2a, Mailing	Address			4 FEI Number
21		26				5-9-3470/3 (Not Applicable
Suite, Apt.	#, etc.	}·=5	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional Fee Required
City & State		27 City & S	City & State			6. Election Campaign Financing \$5.00 May Be
23		28				Trust Fund Contribution Added to Fees
Zip	Country	Zip		Country	/	8. This corporation owes or has paid the current year intangible
24	25 Name and Address of Curre	29		30		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
hc	LOUIDICE, CHRISTOPHER	ant riogisticion arg		81	Name	
	11 North Lake Destiny Driv	/E #400		82	Street	Address (P.O. Box Number is Not Acceptable)
MAITLAND FL 32751						- Address (1.0. Box (distribution of Advisor
V				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 reording or registered agent, or both, in the State of Kinda Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. Lam familiar with and accept the objection 607.0505, Florida Statutes.						
office or re agent. I at	egistered agent, or both, in the Sert m familiar with and accept the	e of Torida Such ortions of Section	change was at 607.0505, Flor	uthorized by ida Statute	y the corp s.	rporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Jun 70	mi				4-22-98
	Signature types or planted name of national as	oes Carecturie d'apopte utile ND DIRECTORS	(1407)	Prostered Age	era signaliuc	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	D OFFICE AS ALL		DITTE	1.1 TITLE		Change Addition
NAME	DELGUIDICE, CHRISTOPHER	R		1.2 NAME	l	
STREET ADDRESS	1101 NORTH LAKE DESTIN	Y DRIVE #400		1,3 STREET	ADDRESS	
CITY-ST-ZIP	MAITLAND FL 32751		Torrese	140117-9	S1 - ZIP	
TITLE NAME	D Leccese, Salvador F	L	_ DELETE	2 1 111LE 2.2 NAME		Deccese, Salvador DODI Lee Road Ste 28 Winker Park, FL 32789
STREET ADDRESS	1412 WEST COLONIAL DRIV	/E #200		2.3 STREET	ADDRESS	2221 Lee Road Ste 28
CITY-ST-ZIP	ORLANDO FL 32804			2.4 CHY-	S1 - ZIP	Winker Park, FL 32789
TITLE			DELETE	3.1 TITLE	7	Change Addition
NAME				3.2 NAME	•	
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP TITLE			DELETE	3.4 CDY=: 4.1 THE	51-411'	☐ Change ☐ Addition
NAME		•		4. 2 NAME		
STREET ADDRESS				4 3 STREET	ADDRESS	
CITY-ST-ZIP			7 757 635	4.4 CITY - S	ST - ZIP	
TITLE		L	DELETE	5.1 TITLE		Change Addition
NAME STREET ADDRESS				5.2 NAME 5.3 STREET	ADDRESS	VI.
CITY-ST-7IP				54 CITY-S		397
TITLE			DELETE	6.1 TITLE		Change Addition
NAME				6.2 NAME	}	-06/11/9801046024
STREET ADDRESS				6.3 STREET		***150.00
City-ST-ZIP	artify that the information sumplies	with this filma does	nol quality for	6.4 CiTY-5		ted in Section 119.07(3)(i), Florida Statutes. I further certify that the information

Indicated on this annual report or supplicing that the individual course and that my signature shall have the same legal effect as if made under oath; that I am an officer or direction of the corporation of 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 alta orment with an address.