

438

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 28, 2005 08:00 AM**  
**Secretary of State**

DOCUMENT # P97000101609

1. Entity Name

GTR - GLOBAL TEK RESOURCES CORPORATION



Principal Place of Business

16119 SW 68 TERR  
MIAMI, FL 33193

Mailing Address

16119 SW 68 TERR  
MIAMI, FL 33193

02112005 No Chg-P CR2E034 (10/03)

## DO NOT WRITE IN THIS SPACE

4. FEI Number

65-0796946

Applied For

Not Applicable

5. Certificate of Status Desired ☐
**\$8.75 Additional  
Fee Required**

6. Name and Address of Current Registered Agent

CORDEIRO DE MATTOS, MARCELO  
16119 SW 68 TERR  
MIAMI, FL 33193

## DO NOT WRITE IN THIS SPACE

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PVPD  
NAME CORDEIRO DE MATTOS, MARCELLO  
STREET ADDRESS 16119 SW 68 TERR  
CITY-ST-ZIP MIAMI, FL 33193

TITLE SD  
NAME MATTOS, ELMA LUCIA  
STREET ADDRESS 16119 SW 68 TERR  
CITY-ST-ZIP MIAMI, FL 33193

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

## DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Elma L Mattos

3/21/05

305-752-2834

Daytime Phone #