

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Mar 29, 2002 8:00 am
Secretary of State

0196113 AV

DOCUMENT # P98000075664

1. Entity Name

G.T.S. ENTERPRISES GROUP CORP.

03-29-2002 90841 001 ***150.00

03-29-2002 90841 002 *****8.75

Principal Place of Business

7311 NW 12 ST

2

MIAMI FL 33126

Mailing Address

7311 NW 12 ST

2

MIAMI FL 33126

2. Principal Place of Business

7640 NW 25 ST.

Suite, Apt. #, etc.

UNIT 107

3. Mailing Address

7640 NW 25 ST.

Suite, Apt. #, etc.

UNIT-107

City & State

MIAMI, FL

City & State

MIAMI, FL

Zip

33122

Country

USA

Zip

33122

Country

USA

4. FEI Number

65-0867414

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired

☒ \$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

DAVILA, ANGELA D

7311 NW 12 ST

#13

MIAMI FL 33126

7. Name and Address of New Registered Agent

Name

TOMAS GORRIO

Street Address (P.O. Box Number is Not Acceptable)

7640 NW 25 ST UNIT 107

City

MIAMI

FL

Zip Code

33122

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

TOMAS GORRIO

3/11/02

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

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

11. OFFICERS AND DIRECTORS

TITLE PD
 NAME DAVILA, ANGELA D
 STREET ADDRESS 8201 N.W. 66TH ST. SUITE 6
 CITY-ST-ZIP MIAMI FL 33166 ☒ Delete

TITLE VT
 NAME DAVILA, ANGELA D
 STREET ADDRESS 8201 N.W. 66TH ST. SUITE 6
 CITY-ST-ZIP MIAMI FL 33166 ☒ Delete

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PD
 NAME TOMAS GORRIO
 STREET ADDRESS 7640 NW 25 ST. UNIT 107
 CITY-ST-ZIP MIAMI, FL. 33122 ☒ Change ☐ Addition

TITLE VT
 NAME TOMAS GORRIO
 STREET ADDRESS 7640 NW 25 ST UNIT-107
 CITY-ST-ZIP MIAMI, FL. 33122 ☒ Change ☐ Addition

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 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

TOMAS GORRIO 3/11/02 (305) 477-7155

Date

Daytime Phone #

CR2E034 (9/01)