

FILED

03 MAY -5 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P98000091219 1. Entity Name LTRT, INC.			
Principal Place of Business 2699 STIRLING ROAD C405 FORT LAUDERDALE, FL 33312		Mailing Address 2699 STIRLING ROAD C405 FORT LAUDERDALE, FL 33312	
2. Principal Place of Business 3711 SW 47 th Ave., Ste. 204 Davie, FL 33314		3. Mailing Address 3711 SW 47 th Ave., Ste. 204 Davie, FL 33314	
4. Name and Address of Current Registered Agent FLORIDA REGISTERED AGENTS, INC 2699 STIRLING ROAD A-201 FORT LAUDERDALE, FL 33312		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		8. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	OP TWERSKY, JONATHAN MR 19196 MYSTIC POINTE DR. AVENTURA, FL 33180	☐ Delete	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VICE CHAIR GLEASON, KEVIN C. MR. 2699 STIRLING RD, STE A-201 FT. LAUDERDALE, FL 33312	☐ Change ☒ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ Change ☐ Addition	
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 907, 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:		KEVIN C. GLEASON, VICE CHAIR DATED: APRIL 30, 2003 PHONE 954-893-7670	

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