

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 05, 1999 8:00 am
Secretary of State

04-05-1999 90018 043 ***150.00

DOCUMENT # P98000096506

1. Corporation Name

G3 TECH INTERNATIONAL CORP.

Principal Place of Business

1111 KANE CONCOURSE
SUITE 518
BAY HARBOR ISLAND FL 33154

Mailing Address

1111 KANE CONCOURSE
SUITE 518
BAY HARBOR ISLAND FL 33154

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/17/1998

4. FEI Number

☒ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

~~AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES FL 33134~~

10. Name and Address of New Registered Agent

81 Name VICTOR RONES ESQ.
82 Street Address (P.O. Box Number is Not Acceptable)
16105 NE 18 AVENUE
83
84 City No. Miami Beach FL 85 Zip Code 33162

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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

VICTOR RONES, ESQ.

3/31/99

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GREENBERG, KENNETH
STREET ADDRESS 1111 KANE CONCOURSE
CITY-ST-ZIP BAY HARBOR ISLAND FL 33154 ☐ DELETE

TITLE VD
NAME GERSTEN, JEFFREY
STREET ADDRESS 1111 KANE CONCOURSE
CITY-ST-ZIP BAY HARBOR ISLAND FL 33154 ☒ DELETE

TITLE SD
NAME GITMAN, JACOB
STREET ADDRESS 1111 KANE CONCOURSE
CITY-ST-ZIP BAY HARBOR ISLAND FL 33154 ☐ DELETE

TITLE TD
NAME GOLDSTEIN, PETER
STREET ADDRESS 1111 KANE CONCOURSE
CITY-ST-ZIP BAY HARBOR ISLAND FL 33154 ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ DELETE

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE VP
1.2 NAME THOMAS WILKINSON
1.3 STREET ADDRESS 1111 KANE CONCOURSE
1.4 CITY-ST-ZIP BAY HARBOR ISLAND, FL 33154 ☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP ☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

14. 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 annual report or supplemental annual 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 12 or Block 13 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

Kenneth Greenberg

DATE

3/31/99

Daytime Phone #

(305) 379-5445

CR2E034 (11/98)

0223042