2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 18, 2008 08:00 A
Secretary of State

DOCUMENT # P99000033651

1. Entity Name
GT GLOBAL TRADING CORPORATION

Principal Place of Business	Mailing Address
10 N.W. LE JEUNE ROAD SUITE 500 MIAMI, FL 33126	10 N.W. LE JEUNE ROAD SUITE 500 MIAMI, FL 33126

DO NOT WRITE IN THIS SPACE

01172008 No Chg-P CR2E034 (11/05)

4. FEI Number
.65-1132000
☐ Applied For
☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ESQUIRE CORPORATE SERVICES, INC.
10 N.W. LE JEUNE ROAD STE 500
MIAMI, FL 33126

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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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

U00000907085
05/05/08-80024-008 150.00

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	TOWNSON, GERARDO
STREET ADDRESS	10 N.W. LE JEUNE ROAD STE 500
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	S
NAME	TOWNSON, PATRICIA
STREET ADDRESS	%N FERNANDEZ, 10 N.W. LE JEUNE RD. STE 500
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	D
NAME	TOWNSON, GERARDO JR
STREET ADDRESS	%N FERNANDEZ, 10 N.W. LE JEUNE RD. STE 500
CITY-ST-ZIP	MIAMI, FL 33126
TITLE	VPD
NAME	TOWNSON, HAROLD
STREET ADDRESS	9455 COLLINS AVE #1001
CITY-ST-ZIP	SURFSIDE, FL 33155
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: _____ 4-15-08 3058673815
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #