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

Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90116 040 ***150.00

		<u>, , , , , , , , , , , , , , , , , , , </u>			$\neg \neg$	1				
DOCUMENT # \$78686										
1. Corporation Name						ļ				
GRAND CENTRAL COMMERCIAL REAL ESTATE, INC.							1 (001) 018 117 (008) (0110 0110	ait	. 	J/8/1 0(2)/ 10 0)
Dain din I Din an	of Business	Mailing Address				1			I QIQII GIBII PIQII	01011 01611 1001
Principal Place		•								
324 HYDE PARK AVE. P. O. BOX 2601 SUITE 215 TAMPA FL 33601										
TAMPA FL 33606 US							DO NOT WR		IS SPACE	
US							Date Incorporated or Qualifed	i		
							07/29/1991			i:d
_	ace of Business	2a. Mailing Address					El Number 59-3077556		⊢	oplied For ot Applicable
Suite, Apt.	# otc	26					<u> </u>			Additional
	, , etc.	27				5. C	Certificate of Status Desired		T	equired
22 27 27 City & State City & State						6 E	Election Campaign Financing		\$5,00	May Be
23		28					rust Fund Contribution			to Fees
Zip	Country	Zip	Country			8. ⊤	his corporation owes the cu	rent year l	ntangible	
24	25	29	30				Personal Property Tax.		☐ Yes	□No
	9. Name and Address of Curre	ent Registered Agent				10. N	Name and Address of New	Registere	d Agent	
CILIA	ITA EDIA/ADD E III		81	Name	Edw	aro	d F. Giunta,	ΙI		
GIUNTA, EDWARD F. III				Street /	Addres	ss_(P.C	D. Box Number is Not Accep	table)		
11410 PALDAO RD					<u> 301</u>	10 8	<u>Samara Dr.</u>			
SUITE 2100 TAMPA FL 33618			83							
1 VIAII	1411 30010		84	City				E		Code
			Tam	npa,	/	F		618		
office or re	utnorized by	the corpo	oration'	i's boa	submits this statement for the rd of directors. I hereby account	ept the app	ointment as re	egistered		
agent. I ar	m familiar with, and accept the oblig	gations of, Section 607.0505, Ele	rid a Statutes	-			/_	15.	- 69	
SIGNATURE	Signature, typed of printed name of registered a	NOTE	: Registered Ager	nt signature n	equired w	when rein	nstating)	DATE		
12.		AND DIRECTORS	13.				DDITIONS/CHANGES TO O	FFICERS .	AND DIRECTO	DRS IN 12
TITLE	DP	☐ DELETE	1.1 TITLE		DΡ				XX Change	Addition
NAME	GIUNTA, EDWARD F., II		1.2 NAME	1.2 NAME E		war	d F. Giunta,	ΙΙ		
STREET ADDRESS	11410 PALDAO ROAD		1.3 STREET	1.3 STREET ADDRESS 3			Samara Dr.			
CITY-ST-ZIP	TAMPA FL 33618		1,4 CITY-S				<u>, FL 33618</u>			
TITLE	V X(X) DELETE		2.1 TTLE	L -					Change	XIX Addition
NAME	GIUNTA, EDWARD F.		2.2 NAME				E. Giunta			
STREET ADDRESS	10103 HAMPTON PLACE		2.3 STREET				Picwood Rd.			
CITY-ST-ZIP						npa,	<u>, FL 33618</u>	_	☐ Change	Addition
TITLE	_		3.1 TITLE						广 cusuāe	C) Modificity
NAME	77720011, 10111271 0		3.2 NAME							
STREET ADDRESS	10104 HAMPTON PLACE			3.3 STREET ADDRESS						,
CITY-ST-ZIP	TAMPA FL		3.4. CITY-S 4.1 TITLE	II-ZIP				_	☐ Change	Addition
TITLE			4.1 MILE							_
NAME			- 6	T ADDRESS			•			ŀ
STREET ADDRESS			4.4 CITY-S							İ
CITY-ST-ZIP TITLE		☐ DELETE	5.1 TITLE	, 🛶					Change	☐ Addition
NAME		_	5.2 NAME							
STREET ADDRESS			5.3 STREE	TADORESS ,	Į					Į
CITY-ST-ZIP			5.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	6.1 TITLE					_	Change	☐ Addition
NAME			6.2 NAME							1
STREET ADDRESS	•		6.3 STREE	TADDRESS						,
CITY-ST-ZIP			6.4 CITY-S	T-ZIP	l					

CITY-ST-ZIP 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: