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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name H85586 (6)

GE VA, INC.	
Principal Place of Business	Mailing Address
2875 STERLING RD. FT LAUDERDALE FL 33312	2875 STERLING RD. FT LAUDERDALE FL 33312



Principal Diago 6		Mailing Address					Attraction of the			
Principal Place C 2875 STERLIN	of Business G.RD	Mailing Address 2875 STERLING	RD.							
FT LAUDERDA		FT LAUDERDALE								
				•		3. Date Incorporated or Qualified 11/15/1985	3a. Date	of Last 4/20/18		
2. Principal Plac	ce of Business	2a. Mailing Addres	is			4. FEI Number			Applied For	
]		26				59-2630012		40.7	Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, 6	etc.			5. Certificate of Status Desired			5 Additional Regulred	
]		City P State				6. Election Campaign Financing			00 May Be	
City & State City & State 28			otate)			Trust Fund Contribution		Added to Fees		
Zip	Country	Zip	С	ountry		8. This corporation has liability for in	ntangible ta	ax under	s 199.032,	
]	25	29	30			Florida Statutes X Yes				
	9. Name and Address of Curr	ent Registered Agent	*************************			10. Name and Address of New R	egistered	Agent		
				81	Name					
	IS, GEORGE			82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)			
	irling RD.			83		AND STREET, THE PROPERTY OF TH				
FT. LAUC	DERDALE FL 33312			63				·····		
				84	City		FL	85	Zip Code	
	Signature, typed or printed nativi of registered ag OFFICERS A	gent and title if any licable		ered Agen	t signature required	d when reinstating: ADDITIONS/CHANGES TO OFF	DATE ICE:RS ANI	DIRECT		
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I do nereby certify that the information supplied with this tilling is voluntarily turnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this administrator 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 obsporation 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.

SIGNATURE: >

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305 587 7764 Daytin-e Phone #