2001 UNIFORM BUSINESS REPORT (UBR)

FILED Jan 23, 2001 8:00 am Secretary of State **DOCUMENT # \$42243** 1. Entity Name THE GENEVA GROUP, INC. 01-23-2001 90104 044 ***150.00 Principal Place of Business Mailing Address 9020 S.W. 78TH COURT 600 BRICKELL AVE., 300-A MIAMI FL 33156 MIAMI FL 33131 DUDUU IU I 3. Mailing Address 2. Principal Place of Business 78 Course 9020 600 Brickfly A34 DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Suite, Apt. #, etc. # 300 Applied For 4. FEI Number City & State 65-0248556 City & State FLONE DA Not Applicable Minni DrigA \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 33156 331 USA 7. Name and Address of New Registered Agent-6. Name and Address of Current Registered Agent BARDAKJY, MICHAEL Street Address (P.O. Box Number is Not Acceptable) 9020 S.W. 78TH COURT **SOUTH MIAMI FL 33156** Zip Code City FL 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 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 9. This corporation is eligible to satisfy its Intangible **\$5.00** May Be 10. Election Campaign Financing After MAY 1, 2001 Fee will be \$550.00 Tax filing requirement and elects to do so. Added to Fees Trust Fund Contribution. (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Addition TITLE ☐ Delete TITLE BARDAKJY, NANCY NAME NAME STREET ADDRESS 9020 S.W. 78TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33133** ☐ Change ■ Addition PSD TITLE □ Delete TITLE BARDAKJY, MICHAEL NAME NAME STREET ADDRESS STREET ADDRESS 9020 S.W. 78TH COURT CITY-ST-ZIP CITY-ST-ZIP **MIAMI FL 33133** ☐ Addition Change ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Addition ☐ Change ☐ Delete TITLE TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 13. I hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.