

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000004235

**Entity Name:** GEAR-UP, INC.**Current Principal Place of Business:**4969 RIVERSIDE DRIVE  
CORAL SPRINGS, FL 33067**Current Mailing Address:**PO BOX 911  
SOUTH SALEM, NY 10590 US**FEI Number:** 43-1964922**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**CARRERA, ADRIANA  
4969 RIVERSIDE DRIVE  
CORAL SPRINGS, FL 33067 US*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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR GLOBAL OPERATIONS,  
SECRETARY  
Name CARRERA, CARMEN MONICA  
Address PO BOX 911  
City-State-Zip: SOUTH SALEM NY 10590

Title DIRECTOR, FOUNDER, CEO  
Name FORRAS, VINCENT  
Address PO BOX 911  
City-State-Zip: SOUTH SALEM NY 10590

Title DIRECTOR  
Name NELSON, PAUL CHIEF  
Address 305 E. HOLM ST.  
City-State-Zip: DEFOREST WI 53532

Title DIRECTOR  
Name GILER, GASTON  
Address PO BOX 911  
City-State-Zip: SOUTH SALEM NY 10590

Title DIRECTOR  
Name CARRERA, ADRIANA  
Address 4969 RIVERSIDE DRIVE  
City-State-Zip: CORAL SPRINGS FL 33067

Title PRESIDENT  
Name NAAB, RONALD  
Address PO BOX 362  
City-State-Zip: ALLENTOWN WI 53002

Title DIRECTOR  
Name ADAMS, LUKE  
Address PO BOX 4286  
City-State-Zip: EL CENTRO CA 92244

Title DIRECTOR  
Name LOOR, AGUSTIN  
Address PO BOX 911  
City-State-Zip: SOUTH SALEM NY 10590

**Continues on page 2**

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE: VINCENT FORRAS****CEO****09/06/2016**

Electronic Signature of Signing Officer/Director Detail

Date

**Officer/Director Detail Continued :**

Title               DIRECTOR INTERNATIONAL OPERATIONS  
Name               CROSS, LINDA  
Address            PO BOX 911  
City-State-Zip:   SOUTH SALEM NY 10590

Title               DIRECTOR  
Name               RUCOLAS , RON  
Address            PO BOX 911  
City-State-Zip:   SOUTH SALEM NY 10590

Title               DIRECTOR  
Name               GOLD, PETER  
Address            PO BOX 911  
City-State-Zip:   SOUTH SALEM NY 10590