2005 FOR PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # 235494

1. Entity Name
GERO ENTERPRISES, INC.

Principal Place of Business	Mailing Address
444 BRICKELL AVE STE 51-204 MIAMI, FL 33131	444 BRICKELL AVE STE 51-204 MIAMI, FL 33131

DO NOT WRITE IN THIS SPACE

02212005   No Chg-P   CR2E034 (10/03)

4. FEI Number	Applied For
59-0903445	Not Applicable

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

6. Name and Address of Current Registered Agent

GOLTZMAN,RICHARD
296 NE 62 AVE
MIAMI, FL 33138

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IN THIS SPACE

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_____

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

FILE NOW!!! FEE IS $150.00 **After May 1, 2005 Fee will be $550.00**	9. Election Campaign Financing Trust Fund Contribution, ☐	**$5.00** May Be Added to Fees	

10.   OFFICERS AND DIRECTORS

TITLE	P
NAME	GOLTZMAN,RICHARD
STREET ADDRESS	3000 MARCES DRIVE P603
CITY-ST-ZIP	AVENTURA, FL 33160
TITLE	V
NAME	GOLTZMAN, PETER
STREET ADDRESS	5095 PALM DR
CITY-ST-ZIP	MELBOURNE BEACH, FL 32951
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

U00000334279
04/27/05-80038-018 150.00

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12. 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 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: _____ Richard I. Goltzman 4/25/05 305-756-7633

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone #