FILED Apr 21, 2003 8:00 am Secretary of State

04-21-2003 90402 049 ***150.00

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

F02000002538 DOCUMENT # 1. Entity Name

GEI-ANI ACQUISITION CORPORATION



Principal Place of Business
4800 N FEDERAL HWY STE 307D

Mailing Address
4800 N FEDERAL HWY STE 3070

BOCA RATON FL 33431 BOCA RATON FL 33431			IL. 3010		• • • •			
50011111101112	0010	500		1	1 1004400 1941 00110 11041 00111 00114 00114 00114 0	1861 1868 18 68 1881	611 1 111111111111111111111111111111111	
	,							
Principal Place of Business 3. Mailing Address					1)))	145 0 1 4011 6001		
Suite, Apt. #, etc. Suite, A		Suite, Apt. #, etc.	ite, Apt. #, etc.		CUEOK UEDE JE MAK	INO CHANCEO		
		<u> </u>			CHECK HERE IF MAKING CHANGES			
City & State		City & State		4. 5	^{El Number} 04-3631640	Applied For Not Applicable		
Zip	Country	Zip	Country	5. (Certificate of Status Desired	\$8.75 Add Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent				
			· Name	Name ,				
KERSHAW, ANNE			Street A	Street Address (P.O. Box Number is Not Acceptable)				
4800 N. FEDERAL HWY STE. 307D								
BOCA RATON								
			City			Zip Code	e	
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 printstated agent and title if applicable (NOTE: Registered Agent signature required when reinstating).								
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					9. Election Campaign Financing	\$5 n	O May Be	
After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State					Trust Fund Contribution.		to Fees	
10. OFFICERS AND DIRECTORS			11.		DITIONS/CHANGES TO OFFICERS A	AND DIRECTOR	2 INI 11	
TITLE C	· · · · · · · · · · · · · · · · · · ·	Delete	TITLE	T	DITIONS/CHANGES TO OFFICERS	☐ Change	Addition	
NAME LE	HRMAN, DOUGLAS 🖑	Delete	NAME			onlinge		
	3 EAST PUTNAM AVENUE	•	STREET ADDRESS					
	EENWICH CT 06830		CITY-ST-ZIP			_,		
TITLE VC	VANAGH, THOMAS	🗶 Delete	TITLE			☐ Change	Addition	
	00 N FEDERAL HWY STE. 3070) .	NAME STREET ADDRESS					
	ICA RATON FL 33431		CITY-ST-ZIP					
TITLE P	agents of the stage	Delete Delete	TITLE	E	- J. J.	Change	Addition	
	RSHAW, ANNE		NAME		•		Ì	
	00 N FEDERAL HWY STE. 307D)	STREET ADDRESS CITY-ST-ZIP				.	
	CA RATON FL 33431		_ -	<u> </u>			Addition	
NAME TITLE	Arthur Warshaw CEO, DIRECTOR	☐ Delete	TITLE NAME			☐ Change	Addition	
STREET ADDRESS	CEO, DIRECTOR	y Ste 307 D	STREET ADDRESS				-	
	Boca Raton, FL		CITY-ST-ZIP					
TITLE	P, DIRECTOR	Delete	TITLE			☐ Change	☐ Addition	
	ans Birkholz	twy Ste 3070	NAME				{	
STREET ADDRESS CITY-ST-ZIP	1200 N Federal 1	/	STREET ADDRESS CITY-ST-ZIP					
	ecretory/Treasu	L 33y31 rev □ Delete	TITLE	 		☐ Change	Addition	
	leffrey Padnis	D Octobe	NAME	1		☐ Ollange		
	TOTAL LATING			Ì				

STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS
CITY-ST-ZIP

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 3 my lowered.

SIGNATURE:

HAED SIGNING OFFICER OR DIRECTOR