## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

officer or director of the corporation of the receiver or trustee empowered to Block 12 or Block 13 if changed, or on applicationent with an address

May 15 1998 8:00am PROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # H27549 (5)GEOSOLAR ENERGY SYSTEMS, INC. Principal Place of Business Mailing Address 3401 N. FEDERAL HWY. 2649 N.W. 28TH TERR. **SUITE 100 BOCA RATON FL 33434** DO NOT WRITE IN THIS SPACE **BOCA RATON FL 33431** 3. Date Incorporated or Qualified 10/29/1984 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0369731 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees Country Ziρ 8. This corporation owes or has paid the current year Intangible 30 Personal Property Tax due June 30. ☐ Yes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ABTAHI, HOMAYOON 2649 NW 28TH TERRACE Street Address (P.O. Box Number is Not Acceptable) 82 **BOCA RATON FL 33434** 83 Zip Code 84 City 11. Pursuant to the provisions of Sections 607.05.02 and 607.15.08, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title it applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 1111.6 **ABTAHI, HOMAYOON** NAME 1.2 NAME 2649 NW 28TH TERRACE STREET ADDRESS 1.3 STREET ADDRESS **BOCA RATON FL** CITY-ST-ZIP 1.4 CiTY - ST - ZIP DELETE Change Addition TITLE 2.1 THILE 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-S1-ZIP CITY-ST-ZIP ☐ DELETE Change Addition TITLE 3.1 TITLE 3.2 NAME NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CHTY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition 5.1 TITLE TITI F NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY-ST-ZIP 14. 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 annual report 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 corporation or the receiver or trustee empowered to elecute this priorit as required by Chapter 607, Florida Statutes; and that my name appears in

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