

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # J67692

1. Entity Name
THE GEOMETRA BUILDERS CORPORATION



Principal Place of Business
11968 N FLORIDA AVE
TAMPA, FL 33612-5222 US

Mailing Address
PO BOX 17715
TAMPA, 33628-7715 US

FILED

2007 APR 25 AM 10:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



01302007 No Chg-P CR2E034 (11/05)

4. FEI Number
59-2782183

Applied For
Not Applicable

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

DI GERLANDO, CARMEN E.
11968 N FLORIDA AVENUE
TAMPA, FL 33612

DO NOT WRITE
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

JOSEPH D. GERLANDO 4/4/07

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May 8, 2004
Added to Fees

400099067084
04/27/07--01005--004 **1895.00

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	DI GERLANDO, JOSEPH
STREET ADDRESS	10116 LINDELAAN
CITY-ST-ZIP	TAMPA, FL
TITLE	V
NAME	DI GERLANDO, CARMEN
STREET ADDRESS	10116 LINDELAAN
CITY-ST-ZIP	TAMPA, FL
TITLE	ST
NAME	PEREZ, CARMEN, E
STREET ADDRESS	10116 LINDELAAN
CITY-ST-ZIP	TAMPA, FL
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

DO NOT WRITE
IN THIS SPACE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:

JOSEPH D. GERLANDO 4/4/07 813-961-8715

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #