2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT # L03000031919

1. Entity Name
GEACO LLC

Principal Place of Business	Mailing Address
6910 CAMARIN ST. CORAL GABLES, FL 33146	6910 CAMARIN ST. CORAL GABLES, FL 33146

DO NOT WRITE IN THIS SPACE

08032007 No Chg-LLC   CR2E083 (11/05)

4. FEI Number	Applied For
NOT APPLICABLE	Not Applicable

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent

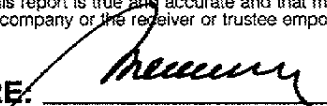|	
RAZOOK, RICHARD J ESQ. C/O HUNTON & WILLIAMS, 1111 BRICKELL AVE SUITE 2500 MIAMI, FL 33131	**DO NOT WRITE IN THIS SPACE**

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

Filing Fee is $50.00
Due by September 14, 2007

9.   MANAGING MEMBERS/MANAGERS

TITLE	MGR
NAME	ACHKAR, NABIL
STREET ADDRESS	6910 CAMRIN STREET
CITY-ST-ZIP	CORAL GABLES, FL 33146
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
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CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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08/07/07-80003-002 50.00

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11. 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 is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: _Nabil J. Achkar_   Aug 2, 07   305 373-0200

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, OR AUTHORIZED REPRESENTATIVE   Date   Daytime Phone #