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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

L43280

(1)

GEO-SCAN, INC.

FILED Jan 28 1998 8:00am Secretary of State



Mailing Address

50 E. SAMPLE RD. 4TH FL 50 E. SAMPLE RD. 4TH FLOOR POMPANO BEACH FL 33064

C/O CONSUL-TECH ENGINEERING, INC. 50 E SAMPLE RD. 4TH FLR POMPANO BEACH FL 33064

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

								01/18/1990				
2.	2. Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied For	
21	21							65-0185367			Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
23	City & State			City & State				Election Campaign Financing Trust Fund Contribution			.00 May Be ded to Fees_	
24		Country 25	29	Zip	30 Cd	ountry		This corporation owes or has pai Personal Property Tax due June		-	r Intangible	
Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent					
VRABEL, STEPHEN G.					81	Name						
50 E. SAMPLE RD. 4TH FLOOR POMPANO BEACH FL 33064							Street Addres	ess (P.O. Box Number is Not Acceptable)				
						83						
						84	City		FL 8	5	Zip Code	

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
12.	THE PARTY OF		_										
TITLE	OFFICERS AND DIRECTORS PS □ DELETE		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	OFFICERS AND DIRECTORS IN 12 Change Addition								
NAME	1 ' -			Charge Ad	JUILIOIT								
	VRABEL, STEPHEN		1.2 NAME										
STREET ADDRESS	10971 NW 9TH MANOR		1.3 STREET ADDRESS										
CITY - ST - ZIP	CORAL SPRINGS FL	[] pereze	1.4 CITY-ST-ZIP										
TITLE	1 1	☐ DELETE	2.1 TITLE	Change Ad	dition								
NAME	BLOOM, GARY		2.2 NAME										
STREET ADDRESS	4301 N. HILLS DR.		2.3 STREET ADDRESS]								
CITY - ST - ZIP	HOLLYWOOD FL		2. 4 CITY - ST - ZIP										
TITLE		☐ DELETE	3.1 TITLE	Change Ad	dition								
NAME			3.2 NAME										
STREET ADDRESS			3.3 STREET ADDRESS										
CITY-ST-ZIP			3.4. CITY-ST-ZIP										
TITLE		☐ DELETE	4.1 TITLE	Change Ad	ldition								
NAME			4. 2 NAME										
STREET ADDRESS			4.3 STREET ADDRESS										
CITY-ST-ZIP			4.4 CITY-ST-ZIP										
TITLE		☐ DELETE	5.1 TITLE	Change Ad	dition								
Name			5.2 NAME		ſ								
Street address			5.3 STREET ADDRESS										
CITY - ST - ZIP			5.4 CITY-ST-ZIP										
TITLE		☐ DELETE	6.1 TITLE	Change Ad	dition								
NAME			6.2 NAME		İ								
STREET ADDRESS			6.3 STREET ADDRESS										

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 tractor of the corporation or the receiver or tractor. See empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed or an attachment with a addiss.

[Stephen Vrabe 1/6/98 (954) 795 8400