## 2005 FOR PROFIT CORPORATION ANNUAL REPORT

## **FILED** DOCUMENT # L58034 Jan 10, 2005 08:00 AM 1. Entity Name **Secretary of State** GEOSAN ENTERPRISES, INC. Principal Place of Business Mailing Address 12520 4TH STREET EAST 12520 4TH STREET EAST TREASURE ISLAND, FL 33706 TREASURE ISLAND, FL 33706 No Chg-P CR2E034 (10/03) 01062005 DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 59-3009501 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent FIBER \$R, GEORGE W. DO NOT WRITE 12520 4TH STREET EAST TREASURE ISLAND, FL. 33706 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** DATE Signature, typed or printed name of registered agent and title if applicable (NOTE, Registered Agent signature required when reinstating) 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE !S \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2005 Fee will be \$550.00 OFFICERS AND DIRECTORS 10. PTD TITLE NAME FIBER, GEORGE W SR STREET ADDRESS **12520 4TH STREET** CITY-ST-ZIP TREASURE ISLAND, FL VSD TITLE FIBER, SANDRA K NAME 12520 4TH STREET STREET ADDRESS CITY-ST-ZIP TREASURE ISLAND, FL :U00000174870 TITLE 01/10/05-80028-007 150.00 NAME STREET ADDRESS DO NOT WRITE CITY-ST-7IP IN THIS SPACE шт NAME STREET ADDRESS CITY-ST-ZIP TIDE. NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 empowered.

SIGNATURE: Love Tober Go

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01/10/05

727-360-8556

Daytime Phone #