FILED

03-04-1999 90070 017 ***150.00

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M61036

1. Corporation Name

GEROPLA ENTERPRISES, INC.

Principal Place of Business Mailing Address C/O MORRIS W. SPERBER C/O MORRIS W. SPERBI			R						
327 CLEMATIS ST. 327 CLEMATIS ST.						DO NOT WRITE IN TH	IC CDACE		
W. PALM BEACH FL 33401 W. PALM BEACH FL 33401						DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed			
						10/19/1987			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	A	pplied For	
21 26						65-0009765	N	ot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc.							\$8.75	Additional	
22 27						5. Certificate of change bearing	Fee Required		
City & State City & State						6. Election Campaign Financing	•	May Be	
23		28		ntn.		Trust Fund Contribution		to Fees	
Zip	Country	Zip	30	intry		This corporation owes the current year Personal Property Tax.	intangible ☐ Yes	□No	
24	9. Name and Address of Curre	nt Registered Agent	30			10. Name and Address of New Registere			
	3. Italia and Address of Curre	in registered regain		81	Name				
SPERBER, MORRIS W.				00	Ot t A d d	(D.O. Day Mumber is Not Accontable)	•		
327 CLEMATIS ST.				82	Street Add	fress (P.O. Box Number is Not Acceptable)			
W. P.	ALM BEACH FL 33401			83					
				0.4	O'h	•	. 85 Zip	Code	
				84	City	poration submits this statement for the purpose			
agent. I ai SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation Signature, typed or printed name of registered agr	ations of, Section 607.0505, Fi	orida Stati	utes.		on's board of directors. I hereby accept the approach the specific directors on the specific directors of the specific directors on the specific dir			
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTO	OR\$ IN 12	
TITLE	SD	☐ DELETE	1.1 T)	TLE			☐ Change	☐ Addition	
NAME	SPERBER, MORRIS W.		1.2 N/	AME					
STREET ADDRESS	327 CLEMATIS ST.		1.3 ST	TREET A	ADDRESS				
CITY-ST-ZIP	W. PALM BEACH FL		1.4 CI	TY-ST-	ZIP				
TITLE			2.1 TI	TLE	Ì		Change	☐ Addition	
NAME	PLATZ, SR., GERWIN R.		2.2 N	2.2 NAME				1	
STREET ADORESS	327 CLEMATIS ST.		2.3 ST	TREET A	ADDRESS			ł	
CITY-ST-ZIP	W. PALM BEACH FL		_	ITY-ST	-ZIP		·	Addition -	
TITLE	-		3.1 TI			, ,	Change	☐ Addition.	
NAME	PLATZ, RENATE		3.2 N/						
STREET ADDRESS	327 CLEMATIS ST.				ADDRESS			1	
CITY-ST-ZIP	W. PALM BEACH FL	☐ OELETE	_	ITY-ST	-ZIP		Change	Addition	
TITLE		☐ DECEIE	4.1 TI				[_] change		
NAME			4.2 N		, DDDCOD				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP		☐ DELETE	4.4 C	TIF	· AP		Change	Addition	
TITLE		<i>000010</i>	5.1 N					-	
NAME STREET ADDRESS					ADDRESS				
				TY-ST-					
CITY-ST-ZIP TITLE		☐ DELETE	6.1 TI		-		Change	Addition	
NAME			6.2 N	AME			•		
STREET ADDRESS			6.3 S	TREET	ADDRESS			1	

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 supplier ental annual report is true and occurate 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 amounted to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an appear with an other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

561-655-8010