2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2004 08:00 AN Secretary of State

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DOCU 1. Entity Nam GEODOF		4					octomy of state
Principal Plac 224 STILLW/ MARCO ISLA		224 224	ng Address Stillwater Ct Stillwater Court CO Island, FL 33937	US	-		
C	O NOT WR	Seeded to the seed of the seed	- App. Acod.	ACE	04262004 4. FEI Numb 65-005	No Chg-P	CR2E034 (10/03) Applied For Not Applicable \$8.75 Additional Fee Required
	6. Name and Address of (ed Agent	- -			·	
#1-B	GEORGE WATER COURT SLAND, FL 33937			DO NOT WRITE IN THIS SPACE			
	named entity submits this state	ement for the purp	oose of changing its regis	stered office or registe	ered agent, or bo	th, in the State of Flo	orida. I am familiar with, and accept
SIGNATURE.		. جسس		<u>, , , , , , , , , , , , , , , , , , , </u>	4 mg		The second secon
	Signature, typed or printed name of regists	red agent and title if ap	plicable. (NOTE_Regi	stered Agent signature require	ed when reinstating)	}	: CATE
FIL After M	E NOW!!! FEE IS \$150. ay 1, 2004 Fee will be	00 \$550.00	Election Campaign Fi Trust Fund Contributi		5.00 May Be ded to Fees		
10.	OFFICER PD	RS AND DIRECTO	DRS			·	
NAME STREET ADDRESS CITY-ST-ZIP	RETHATI, GEORGE 224 STILLWATER TERR MARCO ISLAND, FL	<u> </u>	<u> د د د د د د د د د د د د د د د د د د د</u>				
NAME STREET ADDRESS CITY-S1-ZIP						U9001 04/29/0	00140666 4-80171-005 150.00
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<u> </u>	<u></u>			NOT W	
HAMAL STREET ADDRESS CITY-ST-ZIP					IN '	THIS SF	PACE
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NAME STREET ADDRESS CITY-ST-ZIP			1			(r kan di kacamatan Tan
12. 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 report or supplemental report is true and adcurate 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: SIGNATURE AND TYPEDOR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE AND TYPEDOR PHINTED NAME OF SIGNING OFFICER OR DIRECTOR Oale Device Props #							