

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000060967

Entity Name: GERAES, INC.

FILED
May 01, 2006
Secretary of State

Current Principal Place of Business:

1577 MATTHEW DR.
UNIT 5
FORT MYERS, FL 33907

New Principal Place of Business:

827 ALVIN AVE
LEHIGH ACRES, FL 33971

Current Mailing Address:

1577 MATTHEW DR.
UNIT 5
FORT MYERS, FL 33907

New Mailing Address:

827 ALVIN AVE
LEHIGH ACRES, FL 33971

FEI Number: 20-0945216

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FIGUEIREDO, ROBERTO
1577 MATTHEW DRIVE UNIT 5
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

FIGUEIREDO, ROBERTO
827 ALVIN AVE
LEHIGH ACRES, FL 33971 US

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.

SIGNATURE:

05/01/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FIGUEIREDO, ROBERTO
Address: 1577 MATTHEW DRIVE UNIT 5
City-St-Zip: FORT MYERS, FL 33907

Title: V () Delete
Name: DUTRA, EDGAR TAVARES
Address: 1577 MATTHEW DR. UNIT 5
City-St-Zip: FORT MYERS, FL 33907

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FIGUEIREDO, ROBERTO
Address: 827 ALVIN AVE
City-St-Zip: LEHIGH ACRES, FL 33971

Title: VP (X) Change () Addition
Name: DUTRA, EDGAR TAVARES
Address: 827 ALVIN AVE
City-St-Zip: LEHIGH ACRES, FL 33971

Title: D () Change (X) Addition
Name: DE FIGUEIREDO, MARLUCE C
Address: 827 ALVIN AVE
City-St-Zip: LEHIGH ACRES, FL 33971

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ROBERTO FIGUEIREDO

P

05/01/2006

Electronic Signature of Signing Officer or Director

Date