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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000052654 (9)

GEAR-UP, INC.

Principal Place of Business

CITY-S1-ZIP

STREET ADDRESS

SIGNATURE:

City-St-7IP

TITLE

NAME

12179. 55TH ROAD NORTH 12179, S5TH ROAD NORTH WEST PALM BEACH FL 33411 WEST PALM BEACH FL 33411-8525 3a. Date of Last Report 3. Date Incorporated or Qualified 07/23/1993 01/30/1996 2a. Mailing Address 4. FEI Number 2. Principal Place of Business Applied For 65-0423300 Not Applicable 26 Suite. Apt. #. etc \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name TAILLEFER, ROGER V 12179, 55TH ROAD NORTH 82 Street Address (P.O. Box Number is Not Acceptable) WEST PALM BEACH FL 33431 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typoid or prizzed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)13. 12. DELETE Change Addition 1.1 TITLE TITLE TAILLEFER, ROGER V 1.2 NAME 12179, 55TH ROAD NORTH 1.3 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33411 CITY-ST-ZIP 1.4 CITY - ST - ZIP Addition DELETE Change 2.1 TITLE TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CHTY - ST - ZIP DELETE ☐ Change Addition 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - \$1 - ZIP CITY-ST-7/P DELETE Change Addition 5.1 TITLE THLE 5.2 NAME NAME 53 STREET ADDRESS STREET ADDRESS

54 CITY-ST-ZIP

6.3 STREET ADDRESS

eler ROGER TANLEFEEVAN-15-97

64 CITY-ST-ZIP

14. I do 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 trustee empowered 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 or an attachment with an address.

61 TITLE

62 NAME

DELETE

FILED
Jan 23 1997 8:00am
Secretary of State

Addition

___ Change