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Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000072788 (1)

GEEM TRADING COMPANY, INC.

MIAMI FL 33185

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4432 SW 151 PL 4432 SW 151 PL MIAMI FL 33185 MIAMI FL 33185-4384 3. Date Incorporated or Qualified 3a. Date of Last Report 10/20/1993 05/01/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For NOT APPLICABLE 26 Not Applicable Suite Apt # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 29 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent MAHTANI, GOBIND U 81 Name 4432 SW 151 PL 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33185** 83 84 City 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. Fam familiar with and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or prioted name of registered agent and the if applicable (NOTE: Registered Agent signature required when rainstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PVST THLE DELETE 1.1 TITLE Change Addition Mahtani, Gobind U NAME 1.2 NAME 4432 SW 151 PL STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33185** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE 2.1 TITLE Change Addition MAHTANI, GOBIND U NAME 2.2 NAME 4432 SW 151 PL STREET ADORESS 2.3 STREET ADDRESS

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CITY - ST - ZIP 6.4 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this fring 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 13 or Block 13 or changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

FILED

Jan 16 1997 8:00am

Secretary of State

Davome Phone #

Change

Channe

(96/6)

Addition

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