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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

# P94000076139 (2)

GIOMAR, INC.

FILED Jan 23 1998 8:00am Secretary of State



				····		<b>68</b>   11   <b>59</b>   12   13   14   14   14   14   14   14   14	<b>                                 </b>
Principal Place of Business Mailing Address							
4751 NW 10TH COURT. SUITE 304 PLANTATION FL 33313		4751 NW 10TH COURT. SUITE 304 PLANTATION FL 33313				TE IN THIS SPACE	
					3. Date Incorporated or Qualified		
					10/17/1994	'	
9 Principal P	lace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26		65-0543113	<del></del>	Not Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.			¢g.75	Additional
22		27	<del>}</del> -		5. Certificate of Status Desired		Required
City & State		City & State			Election Campaign Financing \$5.00 May Be		
23	28				Trust Fund Contribution		d to Fees
Zip	Country	Zıp	Cou	ntry	8. This corporation owes or has	paid the current year I	ntangible //
24	25	29	30		Personal Property Tax due Jui		□ NgN//T
	9. Name and Address of Curre	ant Registered Agent			10. Name and Address of New I	Registered Agent	
CL	AMP, A. BRUCE			B1 Name			
4751 NW 10TH COURT				<b>62</b> Street A	ddress (P.O. Box Number is Not Accept	able)	
#304						·	
PLANTATION FL 33313				83			
				84 City		85 Zip	o Code
				' '			
office or I	to the provisions of Sections 607.05 registered agent, or both, in the Sta im familiar with, and accept the obli	te of Florida. Such change s	was authorized	i by the corpo	orporation submits this statement for the oration's board of directors. I hereby acc	purpose of changing ept the appointment a	its registered is registered
SIGNATURE	Signature, typed or printed name of registered a	igent and title if applicable	(NOTE Registered	Agent signature re	equired when reinstating)	DATE	
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTO	PRS IN 12
TITLE	P	DELETE	1,1 TI	LE		☐ Change	Addition
NAME	FRANCO, MARTINE D		1.2 NA	ME			
STREET ADDRESS	4751 NW 10TH CT. APT 30	4	1.3 ST	REET ADDRESS			
CITY-ST-ZIP	PLANTATION FL		1.4 CF	TY-ST-ZIP			
TITLE	VPST	☐ DELETE	2.1 717	LE L		Change	Addition
NAME	CLAMP, A. B		2.2 NA	ME			
STREET ADDRESS	4751 NW 10TH COURT, #3	.04	2.3 ST	REET ADDRESS			
CITY-ST-ZIP	PLANTATION FL			TY-ST-ZIP			
TITLE		DELETI	3.1 101	ILE		Change	Addition
NAME			3.2 NA	ME			Ì
STREET ADDRESS			3.3 ST	REE1 ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		☐ DELETI	£ 4.1 Til	TLE .		☐ Change	: 🔲 Addition
NAME			. 4.2 N	AME			
STREET ADDRESS			4.3 ST	REET ADDRESS			į
CITY-ST-ZIP				TY-ST-ZIP			
TITLE		C DELETI	£ 5.1 Til	ILE		∟ Change	Addition
NAME			5.2 NA	IME SMI			j
STREET ADDRESS			5.3 ST	RFET ADDRESS			
CITY-ST-ZIP				TY-ST-ZIP		——————————————————————————————————————	1 1 1 1 1 1 1
TITLE		☐ DELETI		1		☐ Change	Addition
NAME			6.2 N/	IME			]
STREET ADDRESS			6.3 ST	reet address			
CITY-ST-ZIP				IY-ST-ZIP			
44 Iborobu	andity that the information complied	with this filling dose not due	situ for the eye	motion etalor	Lin Section 119 07/3\(\text{i}\) Florida Statutes	. Trumper certily that th	se intormátión 1.

4. 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 informatio 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 on an attachment with an address.

\_\_\_\_\_

A BALLE

JAMO /

1. 1 Con 1-11-98 954-