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

P94000093705 (9)

GENI-STRUT, INC.

FILED Apr 15 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address			r taanvaar heb hakir Babki abkir bakir bakin bakin kalab tikir kabki abkir bikir ibat	
9040 PARK CENTAL DR. #2018 ORLANDO FL 32839		5040 PARK CENTAL DR. #2018 ORLANDO FL 32839		DO NOT WRITE IN THI	S SPACE	
					3. Date incorporated or Qualified	
					12/29/1994	i
2. Principal Pl	ace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	Applied For
21		26	26		59-3284358	Not Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8.75 Additional
22		27	27		5. Certificate of Status Desired	Fee Required
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	28		Trust Fund Contribution	Added to Fees
Zip	Country	7 (p	Counti	у	8. This corporation owes or has paid the c	current year Intangible
24	25	29	30		Personal Properly Tax due June 30.	▼ Yes □ No
	Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		d Agent
	DLLNER, RICHARD A		8	Name		
2917 W S.R. 434			8	Street Add	ress (P.O. Box Number is Not Acceptable)	
ŞU	ITE 151					
ĻΟ	NGWOOD FL 32779		8	3		
			84	City		85 Zip Code
				'	F	
11. Pursuant t	o the provisions of Sections 607.0	0502 and 607.1508, Florida St	tatutes, the abo	e named corp	poration 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, typed or printed name of registered		(NOTE Registered A;	jont signature requi		
12.		AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AF	
TITLE	D	☐ DELETE	1.1 TITLE			Change Addition
NAME GENIO, PINA			1.2 NAME			
STREET ADDRESS	5040 PARK CENTRAL DR.	# 2018	1.3 STRFE	T ADDRESS		
CITY-ST-ZIP	ORLANDO FL 32839		1.4 CITY-	ST-ZIP		
TITLE	DELETE					Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREE	t address		
CITY-ST-ZIP			2 4 CiTY	ST-ZIP		
TITLE		L. DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY-ST-ZIP			3.4. CITY -	ST-ZIP		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		ĺ
CITY-ST-ZIP			4.4 CITY-	ST-ZIP		
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME		(1) (16)	-
STREET ADDRESS			5.3 STREE	T ADDRESS	411K 17.	
CITY-ST-ZIP			5.4 CITY -	ST - ZIP		<u> </u>
TITLE		☐ DE LETE	6.1 TITLE		- 500024995 -04/15/98010400	+ Change
NAME			6.2 NAME		***150.00	107
STREET ADDRESS			6.3 STREE	T ADDRESS	7-7-7-100 g (JU)	
CITY-ST-ZIP			6.4 CITY-			ļ
14. I hereby ce	ertify that the information supplied	with this filing does not quali	ity for the exemp	tion stated in	Section 119.07(3)(i), Florida Statutes. I further of	ertify 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 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.