

2000 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P94000094058

1. Entity Name

GEOVERSE, INC.

FILED
Apr 25, 2000 8:00 am
Secretary of State

04-25-2000 90140 038 ***150.00

Principal Place of Business

Mailing Address

11312 SR 84
DAVIE FL 33325
US

11312 SR 84
DAVIE FL 33325
US

2. Principal Place of Business

555 SAWGRASS CORPORATE PKWY

3. Mailing Address

555 SAWGRASS CORPORATE PKWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
SUNRISE FLORIDA

FLORIDA

City & State
SUNRISE FLORIDA

FLORIDA

Zip
33325

Country
USA

Zip
33325

Country

4. FEI Number 65-0543457

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

POLTORACK, RONALD D

~~412 SOUTHEAST 18TH STREET~~
~~FT. LAUDERDALE FL 33316~~

Name-

Street Address (P.O. Box Number is Not Acceptable)

555 SAWGRASS CORPORATE PARKWAY

City SUNRISE

FL

Zip Code
33325

8. 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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2000 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PTD
BALLOCK, GEORGE P
853 SOUTH WIND CIRCLE
SUNRISE FL 33326-2133 ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SDV
POLTORACK, RONALD D
~~412 SOUTHEAST 18TH STREET~~
~~FT. LAUDERDALE FL~~ ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
555 SAWGRASS CORPORATE PARKWAY
SUNRISE, FL 33325 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

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☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

13. 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 information indicated on this report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

SIGNATURE: SIGNATURE OF RONALD D. POLTORACK 4-7-00 954-835-9055

CR2E034 (9/99)