## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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DOCUMENT # P9500001246 (4)

G.E.W. INTERNATIONAL, INC.  Principal Place of Business Mailing Address													
1550 SE 17TH ST #5													
								3. Date incorporated or Qualified 01/05/1995	3a. Date	of Last Re	port		
2. Principal F	lace of Business		- n	Mailing Address				4. FEI Number		<b>├</b>	pplied For		
1]			Suite, Apl. #, etc.					65-0545481		Not Applicable \$8.75 Additional			
Suite, Apt.  -	. #, €IG.	Suite, Apt. #, etc.					5. Certificate of Status Desired			Required			
City & State				City & State				Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be			
2(p)   Country   4   25			Zip 30			ntry		Trust Fund Contribution Added to Fees  8. This corporation has liability for intangible tax under s 199.032, Florida Statutes X Yes □ No					
ł		dress of Current		tered Agent	1441			10. Name and Address of New f	Registered	Agent			
					ĺ	81	Name						
	GRAHAM E				•	82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)				
1550 S				63									
FI LAU	IDERDALE FL 3331	ь								11 -			
						84	City		FL	85 Zir	Code		
SIGNATURE	Signature, Type of corporation or	OFFICERS AND			OTE-Ringistered 13.		nt signature require	ELLWITHER PRINCIPLES TO OFF		DIRECTO	RS IN 12		
THEF NAME	WHITE, GRAHA	AM E		E.J occur	1 2 N/				·	-			
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14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify that I am an officer or director of 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.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bare

Date

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