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

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000066905

1. Corporation Name

GERAN ENTERPRISES, INC.

Principal Place of Business	_
7600 NW 6 COURT PLANTATION FL 33324	

Mailing Address

7600 NW 6 COURT PLANTATION FL 33324

# FILED May 06, 1999 8:00 am Secretary of State

05-06-1999 90192 013 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

						3. Date Incorporated or Qualifed 08/28/1995		}
2. Principal Pl	2a. Mailing Address				4. FEI Number	1	Applied For	
21	300 0. 500000	26			ļ	65-0587530	1	Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.				5. Certifcate of Status Desired		Additional Required
City & State	9	City & State				6. Election Campaign Financing	\$5.00	0 May Be
23		28			ļ	Trust Fund Contribution		d to Fees
Zip	Country	Zip	Countr	y		8. This corporation owes the current year Int	angible	
24	25 29 30					Personal Property Tax.	☐ Yes	No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Registered	Agent	
			8	Nam	ie			
	droze, gerald			2 Stre	et Addres	ss (P.O. Box Number is Not Acceptable)		
	7600 NW 6 COURT			"""	31 / 101-1-1			
PLAN	NTATION FL 33324		8:	3				
			8-	City		FL	85 Zip	p Code
office or re	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was aut	thorized b	/ the co	ed corpor	ration submits this statement for the purpose of s's board of directors. I hereby accept the appoi	changing in ntment as	ts registered registered
SIGNATURE	Signature, typed or printed name of registered age	ot and title if applicable (NOTE: 6	Registered Ag	ent signatu	re required v	when reinstating) DATE		<u> </u>
12.		ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECT	ORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE				Change	e 🔲 Addition
NAME	DROZE, GERALD		1.2 NAME					
STREET ADDRESS	7600 NW 6 COURT		1,3 STRE	ET ADDRE	ss			
CITY-ST-ZIP	PLANTATION FL 33324		1.4 CITY-	ST-ZIP				
TITLE	S	☐ DELETE	2.1 TITLE				Change	e 🔲 Addition
NAME	DROZE, ELIZABETH		2.2 NAME					
STREET ADDRESS	7600 NW 6 CT		2.3 STRE	ET ADDRE	ss			-
CITY-ST-ZIP	PLANTATION FL		2. 4 CITY	ST-ZIP				
TITLE		☐ DELETE	3.1 TITLE		$\top$		Change	e Addition
NAME			3.2 NAME					
STREET ADDRESS			3.3 STRE	ET ADDRE	ss			Ì
CITY-ST-ZIP			3.4. CITY	ST-ZIP				
TITLE		☐ DELETE	4.1 TITLE				Change	e 🔲 Addition
NAME			4. 2 NAM					
STREET ADDRESS			4 3 STRE	ET ADDRE	ss			
CITY-ST-ZIP			4.4 CITY-	ST-ZIP	_			
TITLE		☐ DELETE	5.1 TITLE				Change	e Addition
NAME			5.2 NAME					ļ
STREET ADDRESS			5.3 STRE	ET ADDRE	ss			Ì
CITY-ST-ZIP			5.4 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE		T		☐ Change	e 🗌 Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STRE	ET ADDRE	ss			
CITY-ST-ZIP			6.4 CITY-	ST-ZIP	-			_

14. 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 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, with all other like empowered.

SIGNATURE: