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 # P95000086380

GEIGER INTERNATIONAL, INC.

;							
Principal Place of Business Mailing Address					T TERIFERI TIR IBIRI BISH ROHE BRISH REII	s mords total million result	
10202 TRAILWOOD WAY 10202 TRAILWOOD WAY							
JUPITER FL 334	JUPITER FL 33478-4758			DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualifed	THIS SPACE	 -
					01/01/1996		i
2 Bringing B	lace of Business	2a. Mailing Address			4. FEI Number	Apr	plied For
	lace of business .	1—————————————————————————————————————			65-0627686		Applicable
Suite, Apt.	# etc	Suite, Apt. #, etc.		*	_	\$8.75 A	
22	, , , , ,	27			5. Certificate of Status Desired	Fee Rec	
City & State	e	. City.& State		-, -,	6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added to	Fees
Zip	Country	Zip	Countr	у	8. This corporation owes the current ye		
24	25	29 30)		Personal Property Tax.		□No
-	9. Name and Address of Current	Registered Agent			10. Name and Address of New Regis	tered Agent	
or.c	SED JONETHAN O		8	Name			
GEIGER, JONATHAN G			8:	Street Addre	ess (P.O. Box Number is Not Acceptable)		
,	2 TRAILWOOD WAY						
JUPI	TER FL 33478-4758		8	3			
i	•		8	City		F1 85 Zip C	Code
44 Purcuant	to the provisions of Sections 607 0502	2 and 607 1508 Florida Statutes	the abo	/e-named como	oration submits this statement for the purpo	ose of changing its	registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligati	of Elorida. Such change was auth	ionzed h	/ the comoration	n's board of directors. I nereby accept the	appointment as reg	gistered
- Constitution of the	Signature, typed or printed name of registered agent			ent signature required	777	ATE DIDECTO	50 111 40
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO:	Addition
TITLE	DPTS	☐ DELETÉ	1.1 TITLE			☐ ¢ilalige	□ Addition
NAME '	GEIGER, JONATHAN G		1.2 NAME	1			}
STREET ADDRESS	10202 TRAILWOOD WAY			ET ADDRESS			
CITY-ST-ZIP	JUPITER FL 33478-4758	□ pc/erc	1.4 CITY-		-	Change	Addition
TITLE	,	☐ DELETE	2.1 TITLE	1		□ Change	
NAME ,			2.2 NAME				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		□ DELETE	2. 4 CITY			Change	Addition
TITLE '	<u>.</u>	☐ DELETÉ	3.1 TITLE	.	e amount of the second		
NAME "			3.2 NAME	ı			}
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP		☐ OELETE	3.4. CITY			Change	Addition
TITLE		LI DECEIE	4.1 TITLE	.		[] Criange	- rodingi
NAME		,	4. 2 NAM				
STREET ADDRESS			B.	ET ADDRESS			ļ
CITY-ST-ZIP.		∏ BCI cre	4.4 CITY			Change	Addition
TITLE		☐ DELETE	5.1 TITLE	I .		☐ Citalige	
NAME			5.2 NAME				
STREET ADDRESS	· ·			ET ADDRESS			
CITY-ST-ZIP			5.4 CITY				T Addition
TITLE		☐ DELETÉ	6.1 TITLE	ı		Change	☐ Addition

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.

6.2 NAME

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

CR2E034 (11/98)

FILED

Mar 23, 1999 8:00 am Secretary of State

03-23-1999 90004 011 ***150.00