2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

Feb 13, 2004 08:00 AM DOCUMENT # P96000045294 **Secretary of State** 1. Entity Name J & L GEO-HART, INC. Mailing Address Principal Place of Business 2000 W CHURCH ST ORLANDO FL 32805 2000 W CHURCH ST ORLANDO FL 32805 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #. etc. MOORE CR2E034 (11/03) City & State Applied For City & State 4. FEI Number 59-3379967 Not Applicable Zŧp Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent GEORGE, FRANCIS Street Address (P.O. Box Number is Not Acceptable) **5042 BOATHOUSE DRIVE** ORLANDO FL 32812 Zip Code City 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE DATE Signature, typed or printed name of registered agent and title if applicable. FNOTE: Registered Agent signature regured when reinstating FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 10. 11. Addition ☐ Change TITLE Delete THLE U00000050306 GEORGE, FRANCIS MAME NAME 02/16/04-80005-002 150.00 STREET ADDRESS 3086 STONE CASTLE RD STREET ADDRESS ORLANDO FL 32822 CITY-ST-ZIP CITY-ST-ZIP TITLE VSD Delete Tille ☐ Change Addition HART, ELIZABETH NAME NAME STREET ADDRESS 3086 STONE CASTLE RD STREET ADDRESS ORLANDO FL 32822 CHY-SI-ZIP CITY-ST-ZIP ☐ Chance ☐ Addition ☐ Delete ™£ me NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME STRLET ADDRESS STREET ADDRESS CITY ST-ZIP CITY-ST-ZIP ☐ Defete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STRELT ADDRESS CITY-ST-ZIP COY-ST- 3P ☐ Change ☐ Addition ☐ Delete 31717 T331 F NAME NAME STREET ACCRESS STREET ADDRESS CHTY-ST-ZEP CITY-ST-ZIP 12. Thereby 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 10 or Block 11 if changed, or on an attachment with the address, with all other like empowered.

FRANCIS GEORGE.

SIGNATURE:

FILED