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

\$ 15.00

**FILED** 

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE

## May 08 1997 8:00am Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1997

DOCUMENT # P96000049991 (8) G.E.C.S., INC.								A METHACI ING COMP CHAI BONN CONN CONN CONN CONN CONN CONN CONN			
Principal Place of Business  180 SOFTWIND TRAIL MAITLAND FL 32751				180 SOFTWING	Mailing Address 180 SOFTWIND TRAIL MAITLAND FL 32751-5409						
								3. Date Incorporated or Qualified 06/10/1996	3a. Date	of Last Re	aport
	Principal P	lace of Busin	ess	2a. Mailing Ad	dress			4. FEI Number 59 - 33888	19		plied For
21	Suite. Apt	4 616		Suite, Apt.	# oto			3-1-30000			Applicable
22	Suite, Apr	#, UIC.		27]	#, etc.			5. Certificate of Status Desired		<b>8.75</b> A Fee Re	
_	City & Stat	le		City & Stat	e		·	6. Election Campaign Financing		\$5.00	
23			·····	28				Trust Fund Contribution		Added to	
	Zip	Country Zip		-	Country		8. This corporation has liability for intangible tax under s. 199.032.				
24			25 and Address of Curr	[29]	3	0		Florida Statutes  10. Name and Address of New Ry	Yes 🔲		
ļ		ELL, GREGO		sili Dağıstalan Mğalı	<u> </u>	81	Name	IV. Name and Address of New Pe	Ristalan WA	9111	
160 SOFTWIND TRAIL MAITLAND FL 32751						82 83		fress (P.O. Box Number is Not Acceptal		<b>85</b> Zip (	Code
SIC	GNATURE		or printed name of registered a	agent and title if applicable				poration submits this statement for the lation's board of directors. I hereby acceured when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE		
12		D	OFFICERS A	ND DIRECTORS	DELETE	1.1 TO LE		ADDITIONS/CHANGES TO OFFI		Change	Addition
NA*		MIZELL, GREGORY		ــا	المالية المالية		l l			, Change	
	ee i address		TWIND TRAIL			1.2 NAME 1.3 STREET	ADDRESS				ſ
	Y - ST - 716		FL 32751			14 CITY-S					
141		D			DELETE	2.1 YITLE	1			Change	Addition
NAN	J1F	MIZELL, E	ARLENE			2.2 NAME	Ì				ì
STR	FET ADDRESS	160 SOF	TWIND TRAIL			2.3 STREET	ADDRESS				ŧ
C-1	Y - \$1 - ZIP	MAITLAN	D FL 32751			2.4 CITY-	ST-ZIP		·		
HIL	.€	D		LJ	DELETE	3.1 TITLE	į		L.	] Change	Addition
NAM	-		CONTESSA			3 2 NAME	i i				Ì
	EET ADDRESS	1	TWIND TRAIL			3.3 STREET					į
	Y-ST-ZIP	1 -	D FL 32751	<del></del>	DELETE	3.4. CITY-1	ST-ZIP			Change	Addition
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NAM eno	VIE BEET ADDRESS	MIZELL, S	DAISHRINA FWIND TRAIL			4.2 NAME	ADDRESS				1
	Y - ST - 71P		D FL 32751			4.4 CITY-S					}
FIL		MAILAN	VIL SEISI		DELETE	5.1 TITLE	11.4.11		Г	Change	Addition
NAI		1				5.2 NAME	1			-	1
	r: Beet address	1				5.3 STREET	ADDRESS				
	Y - ST - 7)P	1				5.4 CITY-S					
1111		† <del></del>			DELETE	6 1 TITLE		<del></del>		Change	Addition

14. I do 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.

6.3 STREET ADDRESS

STREET ADDRESS