2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Jan 25, 2005 8:00 am Secretary of State

DOCUMENT # P97000049357 1. Entity Name GEO DIRT WORKS INC.						01-25-2005	5 90048 033 ***	150.00
Principal Place of Business 656 TRANQUIL OAKS LANE OVIEDO, FL 32765		Mailing Address 656 TRANQUIL OAKS LANE OVIEDO, FL 32765			1111111111111	I (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	500059	
2. Principal P	lace of Business	3. Mailing Address						
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01042005	Chg-P	CR2E034 (10/03)
City & State		City & State		4. FEI Numb 59-344		· · · · · · · · · · · · · · · · · · ·	opplied For lot Applicable	
Zip	Country	Žip	Coun	try		of Status Desired	S8.75 Ac Fee Requir	
	6. Name and Address of Current	Registered Agent			_7. Name and	Address of New R	egistered Agent	
WHEELER, HELEN H				Name Street Address (P.O. Box Number is Not Acceptable)				
656 TRANQUIL OAKS LANE OVIEDO, FL 32765				Circui Nodi	ireel Address (F.O. Box Northuel Is Not Acceptable)			
				City	FL Zip Code			
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								
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00 9. Election Campaign Financing Trust Fund Contribution. ' \$5.00 May Added to Fee								
10.	OFFICERS AND	DIRECTORS	11.		ADDITIONS	CHANGES TO OFF	ICERS AND DIRECTO	RS IN 11
TITLE NAME			TITU Nam	· .			☐ Change	☐ Addition
STREET ADDRESS CITY+ST-ZIP				ET ADDRESS -ST-ZIP				
TITLE	V Delete TI		TITL				Change	Addition
NAME STREET ADDRESS			NAM STRI	E ET ADORESS	765 Jordon	ct.		
CITY-ST-ZIP	OVIEDO, FL 32765		_	-ST-ZIP				
TITLE NAME	ST WHEELER, ROBERT C	Delete	T/TL: NAM				☐ Change	☐ Addition
STREET ADDRESS CITY-ST-ZIP	656 TRANQUIL OAKS LANE OVIEDO, FL 32765	• -• .		ET ADDRESS -ST-ZIP				
TITLE	Р	☐ Delete	TOL		P/T		Change	Addition
NAME	WHEELER, HELEN' H		NAX					
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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 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 an address, with all other like empowered.

407-366-1009