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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 D97 0000 67814 DOCUMENT # 1. Corporation Name

GETRACO International, Inc.

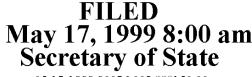
Principal Place of Business

NAME

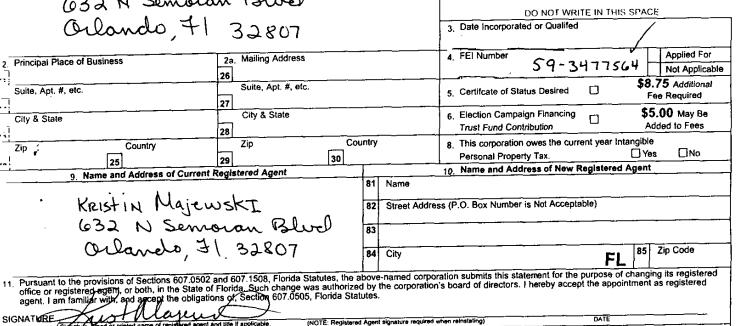
STREET ADDRESS

Mailing Address

632 N Semonan Bluel



05-17-1999 90076 002 ***150.00



ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. Change ☐ Addition TT DELETE 1.1 TITLE 1.2 NAME Kantilal Sanghanz NAME 1,3 STREET ADDRESS 632 N Semoran Blud STREET ADDRESS 1.4 CITY-ST-ZIP ORIANDO , 41 32807 CITY-ST-ZIP Addition Change DELETE 2.1 TITLE TITLE معدع KRISTIN MAJEWSKI 2.2 NAME NAME 2.3 STREET ADDRESS 632 N SEMORIAN BLUP STREET ADDRESS 2.4 CITY-ST-ZIP rober H, country CITY-ST-ZIP Addition ☐ Change DELETE 3.1 TITLE TITL F 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Addition Change ☐ DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-2IP CITY-ST-ZIP Addition ☐ Change DELETE 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-23P CITY-ST-ZIF Change Addition 6.1 TITLE DELETE TITLE

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. CITY-ST-ZIP

62 NAME

8.3 STREET ADDRESS

64 CITY-ST-ZIP

CR2E034 (11/98)

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