

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Sep 30 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # P97000098738 (2)

1. Corporation Name  
 GEOSCAPES NETWORKING SOLUTIONS, INC.



Principal Place of Business: 561 ROBIN HILL CIRCLE BRANDON FL 33510  
 Mailing Address: 561 ROBIN HILL CIRCLE BRANDON FL 33510

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/17/1997

4. FEI Number: 59-3496449 Applied For: Not Applicable

5. Certificate of Status Desired:  \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business: 561 Robin Hill Cir, Brandon FL, 33510

2a. Mailing Address: 4625 Hwy 98 N, Ste. 524, Lakeland, FL, 33809

21-24: Address details including Zip 33510 and Country.

9. Name and Address of Current Registered Agent: MARTINEZ, DANIEL F II, 4144 N. ARMENIA AVE., STE. 350, TAMPA FL 33607

10. Name and Address of New Registered Agent: 81 Name, 82 Street Address, 83, 84 City, 85 Zip Code (FL)

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE: D	NAME: BETHUNE, CHRISTOPHER N	STREET ADDRESS: 561 ROBIN HILL CIRCLE	CITY-ST-ZIP: BRANDON FL 33510	<input checked="" type="checkbox"/> DELETE
TITLE: D	NAME: GRIFFIS, MARK D	STREET ADDRESS: 561 ROBIN HILL CIRCLE	CITY-ST-ZIP: BRANDON FL 33510	<input checked="" type="checkbox"/> DELETE
TITLE: D	NAME: VARGA, TERRY S II	STREET ADDRESS: 3801 SUGAR CREEK COURT	CITY-ST-ZIP: PLANT CITY FL 33567	<input checked="" type="checkbox"/> DELETE
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> DELETE
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> DELETE
TITLE:	NAME:	STREET ADDRESS:	CITY-ST-ZIP:	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE: D	1.2 NAME: Bethune, Christopher N.	1.3 STREET ADDRESS: 561 Robin Hill Cir, Brandon, FL 33510	1.4 CITY-ST-ZIP:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE:	2.2 NAME:	2.3 STREET ADDRESS:	2.4 CITY-ST-ZIP:	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE: D	3.2 NAME: Varga, Terry S. II	3.3 STREET ADDRESS: 3801 Sugar Creek Ct, Plant City, FL 33567	3.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE:	4.2 NAME:	4.3 STREET ADDRESS:	4.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE:	5.2 NAME:	5.3 STREET ADDRESS:	5.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE:	6.2 NAME:	6.3 STREET ADDRESS:	6.4 CITY-ST-ZIP:	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: \_\_\_\_\_ DATE: 9/25/98

CR2E034 (5/98)