


**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Apr 25, 2003 8:00 am
Secretary of State

04-25-2003 90239 006 ***150.00

DOCUMENT # P9900045274	
1. Entity Name GEOMETRICA, INC.	

DO NOT WRITE IN THIS SPACE

11016923

2. Principal Place of Business 1610 N.W. 128th DR.	3. Mailing Address 1610 N.W. 128th DR
Suite, Apt. #, etc. 212	Suite, Apt. #, etc. 212

DO NOT WRITE IN THIS SPACE

City & State SUNRISE, FL	City & State SUNRISE, FL	4. FEI Number N/A	Applied For <input checked="" type="checkbox"/> Not Applicable
Zip 33323	Country USA	Zip 33323	Country USA
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name GINO A. GIORDANO
Street Address (P.O. Box Number is Not Acceptable) 1610 N.W. 128th DR. # 212
City SUNRISE
State FL
Zip Code 33323

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 **4.23.03**

January 1 - May 1 Fee is \$150.00
After May 1, Fee is \$550.00
Amended UBR is \$61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY- ST- ZIP	P GINO A. GIORDANO 1610 N.W. 128th DR. # 212 SUNRISE, FL 33323	TITLE NAME STREET ADDRESS CITY- ST- ZIP	
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IN THIS SPACE**

12. 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 on an attachment with an address, with all other like empowerments.

SIGNATURE:  **GINO A. GIORDANO** DATE **4.23.03** (954) 7402

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034B (12/02)