	PROFIT RPORATION IUAL REPORT			FLORIDA DEPA Sandra Secfeta DIVISION OF	B. Morth ary of Sta	ami ite				
OCUMENT # S33066 (9) GEUR, INC.							i a anna ann an an an an an an an an an a	i élek elék	Billi oibii 164	
	pe of Business PLANT AVE		337	ng Address ' <b>South Plant ave</b> MPA FL 33606	· <del></del>					
District							3. Date incorporated or Qua 02/19/1991	ified 3a. Date	of Last F /14/19	leport 95
Principal F	Place of Business	- -	2a. M 26	failing Address			4. FEI Number 59-3049082			Applied For
Suite, Apt	. #, etc.			uite, Apt. #, etc.			5. Certificate of Status Desire	ed [	\$8.75	Not Applicable  Additional  Required
City & Sta	te		C 28]	ity & State		* · · * · · · · · · · · · · · · · · · ·	6. Election Campaign Financ Trust Fund Contribution	ing	\$5.0	O May Be d to Fees
Zip	25		29	ip	30 Co	untry	8. This corporation has liability Florida Statutes	ty for intangible ta Yes [] No		
	9, Name and	Address of Current Ri	egister	red Agent		81 Name	10. Name and Address of N	lew Registered /	\gent	
	d e. Ebbert Uth Plant ave	•				82 Street Add	lress (P.O. Box Number is Not Acc	eptable)		
TAMPA		•								
	1 E 00002					83				
	16 00002					83 84 City			<b>85</b> Zi	p Code
Pursuant or register	to the provisions of	Sections 607.0502 and in the State of Florida.	d 607.1 Such ch	508, Florida Statutes range was authorize	s, the abo	84 City	ration submits this statement for the	FL ne purpose of cha		
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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:

SIGNATURE AND TYPED OR PRATES NAME OF SIGNING OFFICER OR DIRECTOR!

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