

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 587379
1. Corporation Name
GeoMap Technologies, Inc.

Principal Place of Business Mailing Address
% Vincent E. Martinez, Jr. % Vincent E. Martinez, Jr.
1308 W. Sligh Ave., Suite C 1308 W. Sligh Ave., Ste.C
Tampa FL 33604 Tampa FL 33604

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country
24 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 3a. Date of Last Report
10/14/1991 2/14/1995
4. FEI Number Applied For
59-3091990 Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required
6. Election Campaign Financing ☐ \$5.00 May Be
Trust Fund Contribution Added to Fees
8. This corporation has liability for intangible tax under s 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

Martinez, Vincent E., Jr.
2018 Gordon Street
Tampa FL 33605

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CP ☐ DELETE
NAME Martinez, Vincent E., Jr.
STREET ADDRESS 2018 Gordon Street
CITY-ST-ZIP Tampa FL
TITLE VD ☒ DELETE
NAME Hill, Gary
STREET ADDRESS 2205 Shermont Place
CITY-ST-ZIP Braond, FL
TITLE ST ☐ DELETE
NAME Perez, Anita M.
STREET ADDRESS 6105 Tony Perez Drive
CITY-ST-ZIP Tampa FL
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE President ☒ Change ☐ Addition
1.2 NAME Martinez, Vincent E., Jr.
1.3 STREET ADDRESS 2018 Gordon Street
1.4 CITY-ST-ZIP Tampa FL
2.1 TITLE Vice President ☐ Change ☒ Addition
2.2 NAME Hollingsworth, Jeffrey D.
2.3 STREET ADDRESS 1805 Hitching Post Place
2.4 CITY-ST-ZIP Plant City FL
3.1 TITLE Treasurer ☒ Change ☐ Addition
3.2 NAME Perez, Anita M.
3.3 STREET ADDRESS 6105 Tony Perez Drive
3.4 CITY-ST-ZIP Tampa FL
4.1 TITLE Secretary ☐ Change ☒ Addition
4.2 NAME O'Brien, David J.
4.3 STREET ADDRESS 1426 Plantation Cr. #1610
4.4 CITY-ST-ZIP Plant City FL
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

11-21-96

Date

813-931-8994

Daytime Phone #

Amended Report

FILED
96 NOV 22 AM 8:08
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

mwb
11-25-96

CR2E034 (12/95)