

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F58316

Entity Name: GUANAPE, INC.

FILED  
Apr 22, 2006  
Secretary of State

## Current Principal Place of Business:

%PAUL H. KUPFER  
1700 UNIVERSITY DRIVE  
CORAL SPGS., FL 330716089

## Current Mailing Address:

%PAUL H. KUPFER  
1700 UNIVERSITY DRIVE  
CORAL SPGS., FL 330716089

## New Principal Place of Business:

%PAUL H. KUPFER  
5541 UNIVERSITY DRIVE, SUITE 103  
CORAL SPGS., FL 33067

## New Mailing Address:

%PAUL H. KUPFER  
5541 UNIVERSITY DRIVE, SUITE103  
CORAL SPGS., FL 33067

FEI Number: 59-2548924

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

KUPFER, PAUL H.  
1700 UNIVERSITY DRIVE  
CORAL SPRINGS, FL 33071 US

## Name and Address of New Registered Agent:

KUPFER, PAUL H.  
5541 UNIVERSITY DRIVE  
103  
CORAL SPRINGS, FL 33067 US

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.

SIGNATURE: PAUL H KUPFER

04/22/2006

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: DPT ( ) Delete  
Name: DEBREY, ANA MARIA,  
Address: ZONA 1050 APT 51000  
City-St-Zip: CARACAS, VE

Title: DVS ( ) Delete  
Name: DIAZ LAVIE, CELESTINO I  
Address: ZONA 1050 APT 51000  
City-St-Zip: CARACAS, VE

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CELSTINIO IGNACIA DIAZ LAVIE

V

04/22/2006

Electronic Signature of Signing Officer or Director

Date