

2002 UNIFORM BUSINESS REPORT (UBR)

1/2

FILED
Mar 12, 2002 8:00 am
Secretary of State

01-29-2002 90004 032 ***158.75

DOCUMENT # H07498

1. Entity Name
M. R. GUILD ENTERPRISES, INC.

Principal Place of Business
**3965 INVESTMENT LANE
 SUITE A-3
 RIVIERA BEACH FL 33404-1775**

Mailing Address
**3965 INVESTMENT LANE
 SUITE A-3
 RIVIERA BEACH FL 33404-1775**

72204



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2421114**

Applied For
 Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and

**GUILD, M.R.
 3965 INVESTMENT LANE
 SUITE A-3
 RIVIERA BEACH FL 33404**

Name

Street Address (P.O. Box Number)

City

*could you
 please send
 this as soon as
 possible.
 Thank You!*

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both

SIGNATURE **MERLE R. GUILD**

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back) ☐

FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP
**DP
 GUILD, MERLE R.
 3965 INVESTMENT STE A-3
 RIVIERA BEACH FL** ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

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 STREET ADDRESS
 CITY-ST-ZIP ☐ Delete

TITLE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP ☐ Change ☐ Addition

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other life empowered.

SIGNATURE:

SIGNATURE REQUIRED

MERLE R. GUILD

Date

561-845-1812

Daytime Phone #

CR2E034 (9/01)