## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT # P03000125024

1. Entity Name

SUZÁNNE GUASCH DESIGNS, INC.



Principal Place of Business

Mailing Address

5805 BLUE LAGOON D.R.

5805 BLUE LAGOON D.R.

410

DO NOT WRITE IN THIS SPACE

MIAMI, FL 33126

MIAMI, FL 33126



01062007

No Chg-P

CR2E034 (11/05)

**FILED** 

Jan 11, 2007 08:00 AM Secretary of State

4. FE! Number 20-0743990 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUASCH, SUZANNE 801 BRICKELL KEY DR #1612 MIAMI, FL 33131

## DO NOT WRITE IN THIS SPACE

8. The above the obligati	named entity submits this statement for the properties of registered agent.	urpose of changing its registered	d office or registered agent, or bo	th, in the State of Florida. I am familiar with, and accept
SIGNATURE_	Signature, typed or priviled name of registered agent and title if	applicable. (NOTE Registered	Agent signature required when reinstating)	DATE
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00  9, Election Campaign Fina Trust Fund Contribution.			sing \$5.00 May Be Added to Fees	
10.	OFFICERS AND DIREC	TORS	<del></del>	ugggn582498
TITLE Name Street address City-St-Zip	PT GUASCH, SUZANNE 801 BRICKELL KEY DR #1612 MIAMI, FL 33131		U00000582498 01/11/07-80034-005 150.00	
TITLE NAME Street adoress City-St-Zip	VPS PEREZ-ABREU, EMELINA 540 BRICKELL KEY DRIVE #1224 MIAMI, FL 33131			
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DO NOT WRITE IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP				

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Floride Statutes, I further certify that the information indicated on this report or supplemental poor 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 truefee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICE

01/0

305-979-660

Daytime Phon