

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000016402

Entity Name: S.G. GUESS ENTERPRISES, INC.

FILED  
Apr 29, 2008  
Secretary of State

**Current Principal Place of Business:**

1217 SOUTH POWERLINE ROAD  
POMPANO BEACH, FL 33069

**New Principal Place of Business:**

**Current Mailing Address:**

1217 SOUTH POWERLINE ROAD  
POMPANO BEACH, FL 33069

**New Mailing Address:**

FEI Number: 33-1110939

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

GORE, LAURENCE D ESQ.  
2400 EAST COMMERCIAL BLVD., SUITE 709  
FORT LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PTD ( ) Delete  
Name: GUESS, SAMUEL  
Address: 1217 SOUTH POWERLINE ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VSD ( ) Delete  
Name: GUESS, GLENNA  
Address: 1217 SOUTH POWERLINE ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

Title: ASEC ( ) Delete  
Name: CAULK, JAMES  
Address: 1217 SOUTH POWERLINE ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PTD (X) Change ( ) Addition  
Name: GUESS, SAMUEL L  
Address: 1217 SOUTH POWERLINE ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

Title: VSD (X) Change ( ) Addition  
Name: GUESS, GLENNA M  
Address: 1217 SOUTH POWERLINE ROAD  
City-St-Zip: POMPANO BEACH, FL 33069

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

I hereby certify that the information supplied with this filing does not qualify 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: GLENNA M GUESS

VP

04/29/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date