## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P95000031662 (6)

**GUZMAN EXECUTION SERVICES, INC.** 

Principal Place of Business

SIGNATURE:

701 BRICKELL AVE 11TH FLOOR MIAMI FL 33131 Mailing Address

701 BRICKELL AVE 11TH FLOOR

## FILED Apr 14 1997 8:00am Secretary of State



MIAMI FL 33131				MIAMI FL 33131-2822									
								3. Date Incorpora 04/18/1995	ted or Qualified	1	te of Last Ro )1/1996	port	
2. Principa' Pa				2a. Mailing Address				4. FEI Number	_		Ap	plied For	
11 1200	BRICK	KELL	AVENUE	26 1200 BRICKELL HYENNE			E	65-057343	1			t Applicable	
Suite Abr #	FL001	R		Suite, Apt. #, etc.  27				5. Certificate of Status Desired Service Servi					
Orty & State  MIAN		FL		City & State  28 MIAMI FL				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees					
Ζιρ		Country		, <u> </u>		Country		8. This corporation has liability for intangible tax under s. 199.032,					
4 33/3/-	25	usa	1-1	10 4	15A		Florida Statutes Yes No  10. Name and Address of New Registered Agent						
				Registered Agent	81	Name		10. Name and Add	ress of New He	gistered /	agent		
GUZMAN, LEOPOLDO E							or Name						
	BRICKELL	AVE			82	82 Street Address (P.O. Box Number is Not Acceptable)  ACC BRICKELL AYENGE							
	FLOOR				-								
MIAN	31			83	14	ΥA	FLANE						
					84	City					85 Zip Code		
				10071100 51 11 0			IAM	/		<u>FL</u>		31-3214	
<ol> <li>Pursuant to office or re</li> </ol>	o the provis igistered ac	gent or su	in the State of	and 607.1508, Florida Statutes of Florida. Such change was au	s, trie abov ithorized b	e-named v the corr	corpo poratio	ration submits this si n's board of director	atement for the p	urpose of t the app	cnanging it: ointment as	s registerea registered	
agent Lan	o familiar w	il a	ept the obligat	of Florida. Such change was au ions of, Section 607.0505, Flor								1	
SIGNATURE .	-2	151			LEOA	770	<u>E.</u>	GUZMAN,	DIRECTOR		4/8/	97	
:		v y	OFFICERS AND		Registered Ag	ent signature	required	when reinstaling)	NGES TO OFFIC	DATE	DIDECTOR	C IN 12	
12.	D		CALLOT US MINO	DIRECTORS	1.1 TITLE		Γ –	ADDITIONS/CIT	ANGES TO OFFIC	EUS VIAD	☐ Change	Addition	
NAV!	GUZMAN	LIFOPO	IDO F	C) Meeter	1.2 NAME						LT Guange		
STREET ADDRESS	5825 MA	•				. 4000000							
- 1			FL 33146			T ADDRESS	1						
C Tr. St. ZiP	D		. 5 00110	DELETE	1.4 CITY-:	51-ZIF	<del> </del>				Change	Addition	
N4M!	GUZMAN	I. SUSAN	10	hand to deal to	2.2 NAME								
STREET ADDRESS	5825 MA					T ADDRESS							
Cris-Si-ZiP	CORAL (		FL 33146		2. 4 CITY -								
FILE	SVP			DELETE	3.1 TITLE	DI-EII	<del> </del>				Change	Addition	
NAME	RODRIGUEZ, GEORGE L.					32 NAME					•	_	
STREET ADDRESS	9 HOPI (					3 3 STREET ADDRESS							
(iiiv - \$1 - 7/2	<b>FREEHO</b>	LD NJ 07	7728		3 4. CITY-	ST-ZIP							
PILE				DELETE	41 TITLE						Change	Addition	
NAME					4. 2 NAME								
STREET ADDRESS					4.3 STREE	T ADDRESS							
CHY - \$1 - Ze <sup>2</sup>					4.4 CITY-	ST-ZIP							
TITLE		***************************************		DELETE	5.1 TITLE						Change	Addition	
NAVE .					5.2 NAME				•				
STREET ADDRESS.					5.3 STREE	T ADDRESS	1						
City-St. 7th					5 4 CiTY-:	ST-ZIP	<u></u>						
Tritt				DELETE	6.1 TITLE						Change	Addition	
MAME					6.2 NAME								
STREET ADDRESS					6.3 STREE	1 ADDRESS	1						
O11-St 70	د د میراد سد				6.4 CITY-	ST - ZIP							
14. Edo hereb information Laru as of appears in	y certify that i indicated beer or dire i Block 12 o	at the infor on this an ector of the or Block, 13	mation supplied nual report or corporation 3 if changing or	filing does not qualify mental annual report is tru- to receiver or trustee empowe in an attachment with an addr	tor the exi ie and acc red to exe- ess.	emption s urate and cuite this r	itated i d that n report	n Section 119:07(3)( ny signature shall ha as required by Chap	<ol> <li>Florida Statute: ve the same legal iter 607, Florida S</li> </ol>	s I turther I effect as Itatutes; a	certify that if made und nd that my n	the der oath; that earne	

TEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR