.

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

PROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

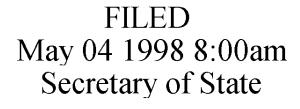
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 662680

(8)

Mailing Address

GUILMEN INVESTMENTS, INC.





% MIGUEL M. GONZALEZ. ESO. 370 MINORCA AVE. STE 5 CORAL GABLES FL 33134		% MIGUEL M. GONZALEZ. ESO. 370 MINORCA AVE. STE 5 CORAL GABLES FL 33134			DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified					
U\$		US	08			05/21/1980				
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For	
21		26	26			59-2003870		No	t Applicable	
Suite, Apt. 4	#, efc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State)	City & State	j			6. Election Campaign Financing		\$5.00	•	
23		Zip Country				Trust Fund Contribution	<u> </u>	Added t		
Zip 24	Country	Zip	30			8. This corporation owes or has paid Personal Property Tax due June 3	_	- · -	angible No	
24	25 29 30 9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent					7 (°	
60	NZALEZ, MIGUEL M ESQUIRE		81	Na	me					
	MINORCA AVE.		00	C 1-		one (D.O. Boy Number is Not Assentable	(a)			
STE			82 Street Add		301 Addre	ess (P.O. Box Number is Not Acceptable	0)			
	RAL GABLES FL 33134		83					·············		
•	THE CABLEST COSTST		84	Cit				85 Zip (Code	
					•		FL			
office or re	egistered agent, or both, in the Stato in familiar with, and accept the obligi	of Florida. Such change was a ations of, Section 607.0505, Flo	authorized b orida Statute	y the s.	corporati	oration submits this statement for the pi ion's board of directors. I hereby accep	t the appo	intment as	registered	
	Signature, typed or printed name of registered ago			ent sign	ature require	ed when reinstaling)	DATE	DIDECTOR	O 11 10	
12.	OFFICERS AN	D DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC		Change	Addition	
TITLE	PTO MENERIDEZ CHILLEDIA		1.1 TITLE				'	onungo	requires	
NAME	Migration of the Control of the Cont		1.2 NAME	T 4000						
STREET ADDRESS	CORAL GABLES FL		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		.55					
CITY-ST-ZIP TITLE	SVD	DELETE	2.1 TITLE	51-ZIP				Change	Addition	
NAME	MENENDEZ, RUTH E.		2.2 NAME		Į.			'	-	
STREET ADDRESS	370 MINORCA AVE, STE 5		2.3 STREET ADDRESS		FSS					
			2. 4 CITY-							
CITY-ST-ZIP TITLE	OTTAL GRADEOTE			3.1 TITLE				Change	Addition	
NAME			3.2 NAME		İ					
STREET ADDRESS			3.3 STREE	T ADDR	ESS					
CITY-ST-ZIP			3.4. CITY							
TITLE	DELETE		4.1 TITLE					Change	Addition	
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREE	T ADDRI	ESS					
CITY-ST-ZIP			4.4 CITY-	ST-ZIP						
TITLE	DELETE 5		5 1 TITLE	5 1 TITLE				☐ Change	☐ Addition	
NAME			5.2 NAME							
STREET ADDRESS			5 3 STREE	T ADDR	ESS					
CITY-ST-ZIP			54 CITY-	ST-ZIP	Щ.	- Addition to the same of the		1		
TITLE		☐ DELETE	6.1 TITLE					Change	Addition	
NAME			6.2 NAME							
STREET ADDRESS		17 1	6.3 STREE	T ADDR	ESS					
CITY-ST-ZIP		////	6.4 CITY-	ST-ZIP		0 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	Zarata a a a a			
14. I hereby of indicated officer or of Block 12 of the indicated of the i	certify that the information supplied w on this annual report or supplementa director of the corporation or the rec or Block 13 if changest, or on an atta	with mis tring gods not qualify for all annual report is true and acc aive or trust a empowered to a consent with an address.	or the exem curate and the execute this	ption s nat my repo	stated in / signatu rt as reqi	Section 119.07(3)(i), Florida Statutes. I tre shall have the same legal effect as if uired by Chapter 607, Elorida Statutes;	made und and that n	ting that the der oath; the ny name ap	at I am an pears in	