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**FILED**  
**Apr 27, 1999 8:00 am**  
**Secretary of State**

04-27-1999 90107 026 \*\*\*150.00



PROFIT CORPORATION  
 ANNUAL REPORT  
 1999

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **G27860**

1. Corporation Name  
**GUERNICA REALTY & INVESTMENT, INC.**



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
**% ALBERTO GUERNICA**  
**264 ST THOMAS**  
**KEY LARGO FL 33037**

Mailing Address  
**% ALBERTO GUERNICA**  
**264 ST THOMAS**  
**KEY LARGO FL 33037**

3. Date Incorporated or Qualified  
**03/11/1983**

2. Principal Place of Business  
 21

Suite, Apt. #, etc.  
 22

City & State  
 23

Zip Country  
 24 25

2a. Mailing Address  
 26

Suite, Apt. #, etc.  
 27

City & State  
 28

Zip Country  
 29 30

4. FEI Number  
**59-2340710**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution  **\$5.00** May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**GUERNICA, ALBERTO**  
**264 ST THOMAS**  
**KEY LARGO FL 33037**

81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PTD**  DELETE  
 NAME **GUERNICA, ALBERTO**  
 STREET ADDRESS **264 ST. THOMAS AVENUE**  
 CITY-ST-ZIP **KEY LARGO, FL 00000**

1.1 TITLE  Change  Addition  
 1.2 NAME  
 1.3 STREET ADDRESS  
 1.4 CITY-ST-ZIP

TITLE **VSD**  DELETE  
 NAME **GUERNICA, MARIA**  
 STREET ADDRESS **264 ST. THOMAS AVENUE**  
 CITY-ST-ZIP **KEY LARGO, FL 00000**

2.1 TITLE  Change  Addition  
 2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

3.1 TITLE  Change  Addition  
 3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

4.1 TITLE  Change  Addition  
 4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

5.1 TITLE  Change  Addition  
 5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

TITLE  DELETE  
 NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

6.1 TITLE  Change  Addition  
 6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed or on an attachment with an address, with all other like empowered.

SIGNATURE: Alberto Guernica Pres. Date: 4/21/99 (305) 451-0323  
 SIGNATURE AND COPIED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

CR2E034 (11/98)