

DOCUMENT # K53862

1. Entity Name  
GUILL INVESTMENTS, INC.

FILED  
Jan 10, 2001 8:00 am  
Secretary of State

01-10-2001 90097 009 \*\*\*150.00



DO NOT WRITE IN THIS SPACE

Principal Place of Business  
595 WEST PROSPECT RD.  
FORT LAUDERDALE FL 33309  
US

Mailing Address  
595 WEST PROSPECT RD.  
FORT LAUDERDALE FL 33309  
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number 65-0094020

Applied For  
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

HUNTER, E.T.  
1930 TYLER STREET  
HOLLYWOOD FL 33020

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

8. 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 \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.

**FILE NOW!!! FEE IS \$150.00**  
**After MAY 1, 2001 Fee will be \$550.00**  
**Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE D  
NAME GUILLIOUMA, WILLIAM  Delete  
STREET ADDRESS 19388 NW 14TH ST  
CITY-ST-ZIP PEMBROKE PINES FL

TITLE  Change  Addition  
NAME Guilliouma, William  
STREET ADDRESS 809 Heron Road  
CITY-ST-ZIP Weston, FL 33326

TITLE D  
NAME GUILLIOUMA, DORIS L.  Delete  
STREET ADDRESS 19388 NW 14TH ST  
CITY-ST-ZIP PEMBROKE PINES FL

TITLE  Change  Addition  
NAME Guilliouma, Doris L.  
STREET ADDRESS 809 Heron Road  
CITY-ST-ZIP Weston, FL 33326

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

TITLE  Delete

TITLE  Change  Addition

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *William Guilliouma* WILLIAM GUILLIOUMA  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-4-01 954  
Date Daytime Phone # 771-8282

CR2E034 (10/00)