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

**PROFIT** CORPORATION ANNUAL REPORT

1999

DOCUMENT # K57588



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Feb 10, 1999 8:00am **Secretary of State**

02-10-1999 90016 007 \*\*\*150.00

GUIDA I	NVESTMENT CORP.						
Principal Place	e of Business	Mailing Address			\$	IPII AIAIF DIBIF BIBIF	BIBSO BIBSO SBBS
4800 NORTH A		4800 NORTH A-1-A					
SUITE 7	V174	SUITE 7					
VERO BEACH FL 32963 VERO BEACH FL 32963					DO NOT WRITE IN 1	HIS SPACE	
US		US			3. Date Incorporated or Qualifed	•	
					01/09/1989	<del></del>	
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number	LA	pplied For
21		26			58-1833507		ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certifcate of Status Desired		Additional
22		27			5. Odlarda 51 States 2 251152	Fee R	equired
City & Stat	te	City & State		•	6. Election Campaign Financing	\$5.00	May Be
23		28			Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Count	у	8. This corporation owes the current year	r Intangible	<b>.</b>
24	25	29	30		Personal Property Tax.	☐ Yes	₩No
	9. Name and Address of	Current Registered Agent			10. Name and Address of New Registe	red Agent	
			8	1 Name	· ·	٠	ļ
	DA, ROSE M.		8	2 Street Ad	dress (P.O. Box Number is Not Acceptable)		*
4800	0 NORTH A1A, SUITE #7		ľ	2 Slieel Au	Street Address (P.O. Box Number is Not Acceptable)		
VER	O BEACH FL 32963		8	3		Tar Varia	2.
						1	211
			8	4 City	· ' '	FL 85 Zip	Code
		207 0502 and 607 1508 Florida Statut				e of changing it	s registered
44 Dureupst			es the abo	ve-named co	rporation submits this statement for the purpos		
11. Pursuant office or ragent. I a	to the provisions of Sections of registered agent, or both, in the am familiar with, and accept the	e State of Florida. Such change was a e obligations of, Section 607.0505, Flo	es, the abo uthorized b rida Statute	ve-named co y the corpora s.	rporation submits this statement for the purposition's board of directors. I hereby accept the a	ppointment as r	egistered
agent. I a	to the provisions of Sections or registered agent, or both, in the am familiar with, and accept the	e obligations of, Section 607.0505, Flo	ilua Statute	<b></b>			egistered
11. Pursuant office or r agent. I a SIGNATURE	Signature, typed or printed name of regis	a obligations of, Section 607.0505, Fig.	: Registered Ag	<b></b>	ired when reinstating) DAT	E	
agent. I a	Signature, typed or printed name of regis OFFICE	e obligations of, Section 607.0503, File stered agent and title if applicable. (NOTE ERS AND DIRECTORS	: Registered Ag	ent signature requ		E S AND DIRECT	ORS IN 12
agent. I a SIGNATURE	Signature, typed or printed name of regis OFFICE	a obligations of, Section 607.0505, Fig.	: Registered Ag	ent signature requ	ired when reinstating) DAT	E	
agent. I a SIGNATURE 12.	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE	itered agent and title if applicable. (NOTE SERS AND DIRECTORS	: Registered Ag	ent signature requ	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT	ORS IN 12
agent. I a SIGNATURE  12.  TITLE	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE	itered agent and title if applicable. (NOTE SERS AND DIRECTORS	: Registered Ag  13.  1.1 TITLE  1.2 NAME	ent signature requ	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT	ORS IN 12
agent. Fa	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE	itered agent and title if applicable. (NOTE SERS AND DIRECTORS	: Registered Ag  13.  1.1 TITLE  1.2 NAME	ent signature requ	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12
agent. Ta SIGNATURE  12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE 4800 NORTH A-1-A #50	itered agent and title if applicable. (NOTE SERS AND DIRECTORS	Registered Ag  13.  1.1 TITLE  1.2 NAMI  1.3 STRE	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT	ORS IN 12
agent. Ta SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE 4800 NORTH A-1-A #50	Stered agent and title if applicable. (NOTE ERS AND DIRECTORS	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY	ent signature requ	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12
Agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50- VERO BEACH FL	Stered agent and title if applicable. (NOTE ERS AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature requ	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50- VERO BEACH FL	Stered agent and title if applicable. (NOTE ERS AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12
Agent. Ta SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50- VERO BEACH FL	Stered agent and title if applicable. (NOTE ERS AND DIRECTORS	Registered Ag	ent signature requ  ET ADDRESS ST-ZIP  ET ADDRESS -ST-ZIP	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12
agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50- VERO BEACH FL	Delete agent and title if applicable. (NOTE ERS AND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12 Addition
Agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Delete agent and title if applicable. (NOTE ERS AND DIRECTORS DELETE	: Registered Ag	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12 Addition
AGENTURE  12. TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Delete agent and title if applicable. (NOTE ERS AND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12 Addition
AGENTURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Stered agent and title if applicable. (NOTE  ERS AND DIRECTORS  DELETE  DELETE  DELETE	: Registered Ag	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	E S AND DIRECT Change	ORS IN 12 Addition
AGENTURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of regis OFFICE DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Delete agent and title if applicable. (NOTE ERS AND DIRECTORS DELETE	Registered Ag  13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
Agent. Ta SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Stered agent and title if applicable. (NOTE  ERS AND DIRECTORS  DELETE  DELETE  DELETE	Registered Ag  13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAMI	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
AGENT TALE  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Stered agent and title if applicable. (NOTE  ERS AND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STRE 4.2 NAMI 4.3 STRE	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition
AGENT. I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	DELETE  DELETE  DELETE	Registered Ag  13.  1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STRE 4.4 CITY	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change Change	ORS IN 12 Addition Addition Addition
AGENT. I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Stered agent and title if applicable. (NOTE  ERS AND DIRECTORS  DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.1 TITLE	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change	ORS IN 12 Addition Addition Addition
AGENT. I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.1 TITLE 5.2 NAMI 4.3 STRE	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change Change	ORS IN 12 Addition Addition
AGENT TARE  SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #500 VERO BEACH FL	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE	ent signature requirement signature requirem	ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change Change	ORS IN 12 Addition Addition Addition
AGENT I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #50 VERO BEACH FL	Delete  Delete	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE 5.4 CITY	ent signature requirement signature requirem	DAT ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change Change	ORS IN 12  Addition  Addition  Addition
AGENT I A SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of regis  OFFICE  DPS GUIDA, ROSE 4800 NORTH A-1-A #500 VERO BEACH FL	DELETE  DELETE  DELETE	13. 1.1 TITLE 1.2 NAMI 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAMI 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAMI 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAMI 4.3 STRE 4.4 CITY 5.1 TITLE 5.2 NAMI 5.3 STRE	ent signature requirement signature requirem	ADDITIONS/CHANGES TO OFFICER	S AND DIRECT Change Change	ORS IN 12  Addition  Addition  Addition

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, op 6) an attachment with an address, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

JU1.2312226