2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 19, 2008 8:00 am
Secretary of State
02-21-2008 90068 022 ***138.75

DOCUMENT # L06000058028

1. Entity Name
GUIDA INVESTMENTS, LLC

30002463

02062008 Chg-LLC CR2E083 (12/06)

Principal Place of Business	Mailing Address
~~835 PAINTED BUNTING LANE~~	~~835 PAINTED BUNTING LANE~~
~~VERO BEACH, FL 32963~~	~~VERO BEACH, FL 32963~~
2. Principal Place of Business - No P.O. Box # 173 SAN REMO DR	3. Mailing Address 173 SAN REMO DR
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State JUPITER FL	City & State JUPITER FL
Zip 33458 Country USA	Zip 33458 Country USA

4. FEI Number ~~APPLIED FOR~~ 20-5014834 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $5.00 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GUIDA, ROSE M	Name
~~835 PAINTED BUNTING LANE~~	Street Address (P.O. Box Number is Not Acceptable) 173 SAN REMO DR.
~~VERO BEACH, FL 32963~~	City JUPITER FL Zip Code 33458

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Rose M. Guida — 2/15/08
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $138.75
After May 1, 2008 Fee will be $538.75

Make check payable to Florida Department of State

9.	MANAGING MEMBERS/MANAGERS		10.	ADDITIONS/CHANGES	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MGRM GUIDA, ROSE M ~~835 PAINTED BUNTING LANE~~ ~~VERO BEACH, FL 32963~~	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	173 SAN REMO DR. JUPITER FL 33458	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
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11. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: Rose M. Guida — 2/15/08 — 561/691-0138
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #