

**FOR PROFIT CORPORATION  
UNIFORM BUSINESS REPORT (UBR)**

**FILED**  
**Aug 20, 2002 8:00 am**  
**Secretary of State**

08-20-2002 90125 015 \*\*\*150.00

DOCUMENT # *M51963*

1. Entity Name

*GUYADEEN ENTERPRISES, INC.*

**DO NOT WRITE IN THIS SPACE**

**B0134593**

2. Principal Place of Business

*9260 SW 102 Street*

3. Mailing Address

Suite, Apt. #, etc.

City & State

*Miami, Florida*

City & State

4. FEEL Number

*59-2832457*

Applied For

Not Applicable

Zip

*33176*

Country

Zip

Country

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

**DO NOT WRITE  
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name *JOSE BOTELLO*

Street Address (P.O. Box Number is Not Acceptable)

*8418 Coral Way*

City *Miami*

FL

Zip Code *33155*

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

*[Signature]*

(NOTE: Registered Agent signature required when reinstating)

DATE

*8/15/02*

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so.  
(See criteria on back)

☒

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

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

TITLE *President*  
NAME *STEVE GUYADEEN*  
STREET ADDRESS *9260 SW 102 STREET*  
CITY-ST-ZIP *Miami, FL 33176*

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IN THIS SPACE**

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 on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*8/15/02*  
Date

Daytime Phone #

Attachment

GUYADEEN INC  
9260 SW 102 STREET.  
MIAMI, FL 33176  
305-595-3870

M 51963

DEPARTMENT OF STATE.  
DIVISION OF CORPORATIONS.

SIR/ MS

I REGET MY LATENESS FOR RENEWING MY CORPATION. I MOVED  
LAST YEAR SEPT. I NOTIFY THE POSTAL SERVICE BUT DID NOT GET MY  
CORPATION RENEWAL NOTICE.

I TALK TO SOME ONE AT YOUR OFFICE. THEY TOLD ME TO WRITE  
THIS LETTER.

THANK YOU.

  
STEVE GUYADEEN