


**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 14, 2004 8:00 am**  
**Secretary of State**

04-14-2004 90065 008 \*\*\*150.00

**DOCUMENT # P00000040075**

1. Entity Name  
**FINCA GUAYABALES, INC.**



Principal Place of Business      Mailing Address

P. O. BOX 143921      P. O. BOX 143921  
 CORAL GABLES, FL 33114-1      CORAL GABLES, FL 33114-1

**DO NOT WRITE IN THIS SPACE**

1300204J



03192004    No Chg-P    CR2E034 (10/03)

4. FEI Number <b>65-1000238</b>	Applied For Not Applicable
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5. Certificate of Status Desired        **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**ROHAN, LAURENCE J**  
**4675 PONCE DE LEON BLVD., SUITE 302**  
**CORAL GABLES, FL 33146-2113**

**DO NOT WRITE IN THIS SPACE**

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

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2004 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PSTD MARTINEZ, LAURA 1551 SW 104TH PASSAGE, #109 MIAMI, FL 33174
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *Laura Martinez*      *4/2/04*      \_\_\_\_\_  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR      Date      Daytime Phone #