

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 08, 2002 8:00 am
Secretary of State

04-08-2002 90237 047 ***150.00

0088367 AV

DOCUMENT # P00000110644

1. Entity Name

GUIGUI DECOR, INC.

Principal Place of Business

**11826 NW 10 AVENUE
 MIAMI FL 33168**

Mailing Address

**11826 NW 10 AVENUE
 MIAMI FL 33168**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

15111 SW 46 ST

Suite, Apt. #, etc.

City & State

MIRAMAR, FLORIDA

Zip

33027

Country

USA

4. FEI Number

65-1062935

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
 Fee Required**

6. Name and Address of Current Registered Agent

PENA, ALICIA

15111 SW 46 ST

MIRAMAR FL 33027

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible

Tax filing requirement and elects to do so: ☐

(See criteria on back)

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 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

TITLE **VP** ☐ Delete
 NAME **BENOIT, DESDEMONA**
 STREET ADDRESS **15111 SW 46 STREET**
 CITY-ST-ZIP **MIRAMAR FL 33027**

TITLE **S** ☐ Delete
 NAME **PENA, ISAVRA**
 STREET ADDRESS **15111 SW 46 STREET**
 CITY-ST-ZIP **MIRAMAR FL 33027**

TITLE **D** ☒ Delete
 NAME **BENOIT, CARMEN**
 STREET ADDRESS **675 NW 122 STREET**
 CITY-ST-ZIP **MIAMI FL 33168**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **~~VP~~ D** ☒ Change ☒ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **S/D** ☒ Change ☐ Addition
 NAME **Pena, ISAVRA**
 STREET ADDRESS **404 LAKEVIEW DR #202**
 CITY-ST-ZIP **WESTON, FL 33326**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE **President / D1 P/DIM** ☐ Change ☒ Addition
 NAME **PENA, ALICIA**
 STREET ADDRESS **15111 SW 46 ST**
 CITY-ST-ZIP **MIRAMAR, FL 33027**

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

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:

Alicia Peña **Alicia Peña**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/20/02

Date

305 881 3403

Daytime Phone #

CR2E034 (9/01)