

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jul 30, 2002 8:00 am
Secretary of State

07-30-2002 90378 036 ***558.75

DOCUMENT # P01000033279

1. Entity Name
GUTS, INC.

Principal Place of Business

**7927 PALMDALE DR
ORLANDO FL 32819**

Mailing Address

**7927 PALMDALE DR
ORLANDO FL 32819**

2. Principal Place of Business

7680 UNIVERSAL BLVD

3. Mailing Address

156 West 56th ST 4th FL

Suite, Apt. #, etc.

560

Suite, Apt. #, etc.

City & State

ORLANDO, FLORIDA

City & State

New York, N.Y.

4. FEI Number

59-3719535

Applied For

Not Applicable

Zip

Country

32819

Zip

Country

10019

USA

5. Certificate of Status Desired



**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

HANNA, DAVID H JR

7300 WESTPOINTE BLVD., #713

ORLANDO FL 32835

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

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 \$550.00
After September 13, 2002 Fee will be \$750.00
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	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Delete
D	ANGEL, ASHLEY	8305 LAKE SERENE DR	ORLANDO FL 32836	<input type="checkbox"/>
D	UNDERWOOD, JACOB	8305 LAKE SERENE DR	ORLANDO FL 32836	<input type="checkbox"/>
D	MILLER, DANIEL	8305 LAKE SERENE DR	ORLANDO FL 32836	<input type="checkbox"/>
D	PENICK, TREVOR	8305 LAKE SERENE DR	ORLANDO FL 32836	<input type="checkbox"/>
D	ESTRADA, ERIK-MICHAEL	8305 LAKE SERENE DR	ORLANDO FL 32836	<input type="checkbox"/>
				<input type="checkbox"/>

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change	<input type="checkbox"/> Addition
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

CR2E034 (4/02)

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:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #