

2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90026 003 ***150.00

DOCUMENT # P01000044026

1. Entity Name
4 GUP, INC.



Principal Place of Business
4434 E. WHITEWATER AVE.
WESTON, FL 33332

Mailing Address
4434 E. WHITEWATER AVE.
WESTON, FL 33332

2. Principal Place of Business - No P.O. Box #
291 FERN DRIVE

3. Mailing Address
291 FERN DRIVE

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State
WESTON, FL

City & State
WESTON, FL

Zip
33326

Country

Zip
33326

Country

02192007 Chg-P CR2E034 (12/06)

4. FEI Number
65-1109706

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GARCIA, VLADIMIR J.
4434 E. WHITEWATER AVE.
WESTON, FL 33332

7. Name and Address of New Registered Agent

Name

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

291 FERN DRIVE

City WESTON

FL

Zip Code 33326

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.

VLADIMIR GARCIA

(NOTE: Registered Agent signature required when reinstating)

2/19/07

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 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 D GARCIA, VLADIMIR ☐ Delete
STREET ADDRESS 4434 E. WHITEWATER AVE.
CITY-ST-ZIP WESTON, FL 33332

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

TITLE
NAME ☐ Delete
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE
NAME DP GARCIA, VLADIMIR J. ☒ Change ☐ Addition
STREET ADDRESS 291 FERN DRIVE
CITY-ST-ZIP WESTON, FL 33326

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

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

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

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

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

12. 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VLADIMIR J. GARCIA PRESIDENT 2/19/07 (954)309-7051

Date

Daytime Phone #