

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

FILED
Apr 21, 2003 8:00 am
Secretary of State

04-21-2003 90350 007 ***150.00

DOCUMENT # P02000070998

1. Entity Name

Guis Enterprises, Inc. ✓



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

7951 SW 40th Street

Suite, Apt. #, etc.

206

3. Mailing Address

7951 SW 40th Street

Suite, Apt. #, etc.

206

City & State

Miami, FL

City & State

Miami, FL

Zip

33155

Country

U.S.

Zip

33155

Country

U.S.

4. FEI Number

54-2085212

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

7. Name and Address of Current Registered Agent

Name

Reyes, Israel Jr.

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

7951 SW 40th Street, Ste 206

City

Miami

FL

Zip Code

33155

**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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE: PD
NAME: Reyes, Israel Jr.
STREET ADDRESS: 7951 SW 40th Street, Ste 206
CITY-ST-ZIP: Miami, FL 33155

TITLE: SD
NAME: De La Rosa, Guillermo
STREET ADDRESS: 7951 SW 40th Street, Ste 206
CITY-ST-ZIP: Miami, FL 33155

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

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/03
Date

305-261-6231
Daytime Phone #

CR2E034B (12/02)