## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

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## DOCUMENT # P03000009957

JOHNNY GUERRERO & SONS, INC.



**FILED** May 15, 2006 08:00 AM Secretary of State

Principal Place of Business

1027 WARDEN LANE

IMMOKALEE, FL 34142 US

Mailing Address

1027 WARDEN LANE

IMMOKALEE, FL 34142 US



04242006

No Cha-P

CR2E034 (11/05)

4. FEI Number 06-1674105 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNNY J. GUERRERO 1027 WARDEN LANE IMMOKALEE, FL 34142

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	named entity submits this statement for the pions of registered agent.	ourpose of changing its registere	d office or re	egistered agent, or bo	th, in the State of Florida. I am familiar with, and accept			
SIGNATURE.	Signature, typed or printed name of registered agent and title	f applicable. (NOTE: Registered	Agent signature	required when reinstating)	DATE			
FILE NOW!!! FEE IS \$150.00  After May 1, 2006 Fee will be \$550.00  9. Election Campa Trust Fund Cont			cing	\$5.00 May Be Added to Fees				
10. OFFICERS AND DIRECTORS								
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GUERRERO, JOHNNY J 1027 WARDEN LANE IMMOKALEE, FL 34142	·		,	U00000564372 05/20/06-80062-004 150.00			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V GUERRERO, JOHNNY J 1027 WARDEN LANE IMMOKALEE, FL 34142							
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE			
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TITLE NAME STREET ADDRESS CITY-ST-ZIP								
TITLE NAME 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.

TURE AND AT PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/10/ac Daytime Phone \*