

2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 19, 2004 8:00 am
Secretary of State

04-19-2004 90258 021 ***150.00

DOCUMENT # P03000123324

1. Entity Name

GUTI GENERAL BUSINESS, INC.



Principal Place of Business

2619 RIVER REACH DRIVE
NAPLES FL 34104

Mailing Address

2619 RIVER REACH DRIVE
NAPLES FL 34104

02000000

2. Principal Place of Business

NAPLES/222 Industrial BLVD

3. Mailing Address

222 Industrial BLVD



MOORE

CR2E034 (11/03)

Suite, Apt. #, etc.

173

Suite, Apt. #, etc.

173

City & State

NAPLES, FL

City & State

NAPLES, FL

4. FEI Number

02-0710894

Applied For

Not Applicable

Zip

34104

Country

USA

Zip

34104

Country

USA

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

GUTIERREZ, CARLOS E
2619 RIVER RIDGE DRIVE
NAPLES FL 34234

Address
→ change

7. Name and Address of New Registered Agent

Name GUTIERREZ, CARLOS E

Street Address (P.O. Box Number is Not Acceptable)
222 Industrial BLVD Suite 173

City NAPLES

FL

Zip Code 34104

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

FILE NOW!!! FEE IS \$150.00

After May 1, 2004 Fee will be \$550.00

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 ☐ Delete
NAME GUTIERREZ, CARLOS E
STREET ADDRESS 2619 RIVER RIDGE DRIVE
CITY-ST-ZIP NAPLES FL 34234

TITLE VD ☐ Delete
NAME GUTIERREZ, ANDRES F
STREET ADDRESS 2619 RIVER RIDGE DRIVE
CITY-ST-ZIP NAPLES FL 34234

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

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

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

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

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

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 Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carlos Gutierrez

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/15/2004

Date

(239) 4350028

Daytime Phone #