

# **2008 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P06000109440

**FILED**  
**Nov 06, 2008**  
**Secretary of State**

**Entity Name:** GUIDE SYSTEMS CORPORATION

**Current Principal Place of Business:**

181 NW 78 TERRACE UNIT 103  
PEMBROKE PINES, FL 33024 US

**New Principal Place of Business:**

3761 W STATE ROAD 84  
DAVIE, FL 33312 US

**Current Mailing Address:**

181 NW 78 TERRACE UNIT 103  
PEMBROKE PINES, FL 33024 US

**New Mailing Address:**

3761 W STATE ROAD 84  
DAVIE, FL 33312 US

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GOMEZ, BRIAN  
181 NW 78 TERRACE UNIT 103  
PEMBROKE PINES, FL 33024 US

**Name and Address of New Registered Agent:**

GOMEZ, BRIAN  
3761 W STATE ROAD 84  
DAVIE, FL 33024 US

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.

SIGNATURE: BRIAN GOMEZ

11/06/2008

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: GOMEZ, BRIAN  
Address: 181 NW 78 TERRACE UNIT 103  
City-St-Zip: PEMBROKE PINES, FL 33024 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: GOMEZ, BRIAN  
Address: 3761 W STATE ROAD 84  
City-St-Zip: DAVIE, FL 33024 US

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: BRIAN GOMEZ

P

11/06/2008

Electronic Signature of Signing Officer or Director

Date