

2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 07, 2008 8:00 am
Secretary of State

01-07-2008 90038 022 ***150.00

DOCUMENT # P07000083021																																																											
1. Entity Name GUIMARNIC CORP.																																																											
Principal Place of Business 20100 W COUNTRY CLUB DR SUITE 301 AVENTURA, FL 33180			Mailing Address 20100 W COUNTRY CLUB DR SUITE 301 AVENTURA, FL 33180																																																								
2. Principal Place of Business - No P.O. Box # 4791 SW SR7		3. Mailing Address 4791 SW SR7																																																									
Suite, Apt. #, etc.		Suite, Apt. #, etc.																																																									
City & State Davie FL		City & State Davie		4. FEI Number 56-2671461																																																							
Zip 33314		Country Broward		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																							
6. Name and Address of Current Registered Agent SUGASTI, GUSTAVO 20100 W COUNTRY CLUB DR SUITE 301 AVENTURA, FL 33180			7. Name and Address of New Registered Agent Name: Sugasti Gustavo Street Address (P.O. Box Number is Not Acceptable): 4791 SW SR7 City: Davie FL Zip Code: 33314																																																								
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: DATE: 01-03-08																																																											
FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00		9. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees																																																									
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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: DATE: 01.03.08																																																											