


2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 02, 2004 8:00 am
Secretary of State

04-02-2004 90049 044 ***150.00

DOCUMENT # P95000066565	
1. Entity Name MCGUIRE LAND CORPORATION	

Principal Place of Business 5375 STIRLING ROAD 6211 Orange Dr. FT. LAUDERDALE, FL 33314	Mailing Address 5375 STIRLING ROAD 6211 Orange Drive FT. LAUDERDALE, FL 33314
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02262004 No Chg-P CR2E034 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0607271	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent MCGUIRE, DEBORAH 5375 STIRLING ROAD FT. LAUDERDALE, FL 33314	Al Griffin 6211 Orange Drive Ft. Lauderdale, FL 33314
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**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 <u>Al Griffin</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-stating)</small>	DATE <u>March 8, 2004</u>

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDT MCGUIRE, DEBORAH 5375 STIRLING ROAD 6211 Orange Drive FT. LAUDERDALE, FL 33314
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IN THIS SPACE**

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: <u>Deborah Mathure</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	DATE <u>March 8, 2004</u> <small>Date</small>
	DAYTIME PHONE # <u>(954) 434-8081</u> <small>Daytime Phone #</small>