

FILING FEE AFTER MAY 1ST IS \$550.00

FILED  
Feb 25 1998 8:00am  
Secretary of State

ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000068562 (4)  
GUIM TECH INC.



Principal Place of Business 3663 S.W. 8TH STREET 205 CORAL GABLES FL 33135		Mailing Address 834 VENETIA CORAL GABLES FL 33134	
2. Principal Place of Business		2a. Mailing Address	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25	Country	30	Country

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 09/06/1995	
4. FEI Number 65-0609095	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent GUIM, RAUL 834 VENETIA CORAL GABLES FL 33134		10. Name and Address of New Registered Agent	
81	Name	PAUL Guim	
82	Street Address (P.O. Box Number is Not Acceptable)	3663 S.W. 8th ST. SUITE 205	
83	City	MIAMI	
84	State	85	Zip Code
	FL		33135

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE		DATE	
Signature: typed or printed name of registered agent and title if applicable		(NOTE: Registered Agent signature required when reinstating)	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	CHAIRMAN OF THE BOARD
NAME	GUIM, RAUL	1.2 NAME	Guim, Raul
STREET ADDRESS	834 VENETIA	1.3 STREET ADDRESS	834 Venetia
CITY-ST-ZIP	CORAL GABLES FL 33134	1.4 CITY-ST-ZIP	CORAL GABLES, FL 33134
TITLE		2.1 TITLE	PRESIDENT
NAME		2.2 NAME	CARMONA, EMERSON
STREET ADDRESS		2.3 STREET ADDRESS	3663 S.W. 8th ST, SUITE 205
CITY-ST-ZIP		2.4 CITY-ST-ZIP	MIAMI, FL 33135
TITLE		3.1 TITLE	SECRETARY, TREASURER
NAME		3.2 NAME	TORRES DE NAVARRA, CARLOS
STREET ADDRESS		3.3 STREET ADDRESS	3663 S.W. 8th ST, SUITE 205
CITY-ST-ZIP		3.4 CITY-ST-ZIP	MIAMI, FL 33135
TITLE		4.1 TITLE	SR. VICE PRESIDENT
NAME		4.2 NAME	GUIM, AURELIO
STREET ADDRESS		4.3 STREET ADDRESS	3663 S.W. 8th ST, SUITE 205
CITY-ST-ZIP		4.4 CITY-ST-ZIP	MIAMI, FL 33135
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or of an attachment with an address.

SIGNATURE: AURELIO GUIM 2/10/98 305-446-9993  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0101205

CR2034 (10/97)