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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000069290

The Guinco Corporation 915 S.E. 6th Avenue Gainesville, FL 32601

## FILED Jun 02 1997 8:00am Secretary of State

	esville, FL_3					<del></del>				
Principal Plac	ce of Business	Mailing Address	S							
						3. Date Incorporated or C Sept. 8, 19		ţ	ate of Las	st Report
2. Principal I	Place of Business	2a. Mailing Add	ress			4. FEI Number				Applied Fo
1		26				59-3	33388	99		Not Applica
Suite, Apt	. #. etc.	Suite, Apt. #	etc.			5. Certificate of Status De	esired	хx	•	5 Additiona Required
City & Sta	ile	City & State		·· ·		6. Election Campaign Fin	ancino		<del></del>	00 May Be
3		28				Trust Fund Contribution	•			ed to Fees
Zip	Country	Zip		Country	/	8. This corporation has list	ability for in	ntangible	tax unde	er s. 199.032
4	25	29	30			Florida Stalutes		Yes 🖔		
	9. Name and Address of C	Current Registered Agent				10. Name and Address o	f New Reg	istered /	Agent	
<b>177</b> 1.7	Maxey Cockerh	am Cuinuard	r	81	Name					
915	S.E. 6th Avenu	e Guinyaru		82	Street Ac	dress (P.O. Box Number is Not	Acceptabl	le)		
		2601		83						
\\	0011110, 12 0	2001		63						
<b>W</b>				84	City			<b>1</b> -1	85 Z	ip Code
44 5		2 0500 and 007 1500. Find	do Cial dos do			repreties a threshe this atalanean	t for the m	FL		- 70
11. Pursuani	to the provisions of Sections 60	17.0502 and 607.1508, Flori	da Statutes, in	rized by	e-nameo co	orporation submits this statement ration's board of directors. I here	t for the pu by accept	urpose oi t the appi	cnangin ointment	ig its registe as registere
OTHICE OF	registered agent, or both, in the	State of Florida, Such char	ige was aumor		y the corpo					
agent. I a	to the provisions of Sections 60 registered agent, or both, in the am familiar with, and accept the	obligations of, Section 607.	.0505, Florida	Statutes	s.					
			•							
SIGNATURE	Signature, typed or printed name of registor	ered agent and title if applicable	(NOTE Regis	stered Ago		guned when reinstating)		DATÉ		
SIGNATURE	Signature, typed or printed name of registic	ered agent and title if applicable	(NOTE Regis	stered Ago				DATÉ	DIRECT	OR\$ IN 12
SIGNATURE  12.  TITLE 2/1	Signature, typed or printed name of registr OFFICER President/Tre	ered agent and title if applicable RS AND DIRECTORS  asurer: Di	tNOTE Regis	stered Ago 13.		guned when reinstating)		DATÉ		OR\$ IN 12
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