

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



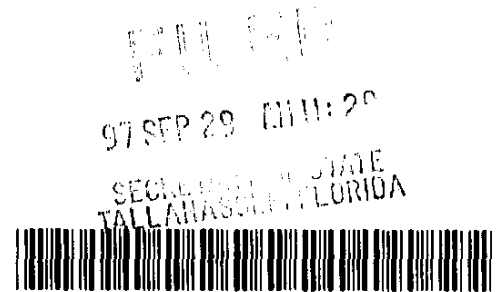
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000006657 (6)

1. Corporation Name
GUERNSEY INVESTMENTS OF FLORIDA, INC.

Principal Place of Business
% COHEN, CHASE, HOFFMAN & TRAUTMAN, P.A.
9400 S. DADELAND BLVD., SUITE 600
MIAMI FL 33156

Mailing Address
% COHEN, CHASE, HOFFMAN & TRAUTMAN, P.A.
9400 S. DADELAND BLVD., SUITE 600
MIAMI FL 33156



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 01/22/1996		3a. Date of Last Report	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 74-2771823		Applied For Not Applicable	
22	City & State	27	City & State	5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
23	Zip	28	Country	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees	
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No			

9. Name and Address of Current Registered Agent

COHEN, HERBERT J
9400 SOUTH DADELAND BLVD.
~~SUITE 600~~
MIAMI FL 33156

10. Name and Address of New Registered Agent

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	SUITE 600
84	City
85	Zip Code

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

Signature, typed or printed name of registered agent and fee, if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D	V	☐ DELETE	1.1 TITLE	☒ Change	☐ Addition	
NAME	GONZALEZ-CARAJAL, CAROLINA			1.2 NAME			
STREET ADDRESS	9400 S. DADELAND BLVD. SUITE 600			1.3 STREET ADDRESS	3704 GREENBRIER DR. - UNIVERSITY PARK		
CITY - ST - ZIP	MIAMI FL 33133			1.4 CITY - ST - ZIP	DALLAS TX 75225		
TITLE			☐ DELETE	2.1 TITLE	☐ Change	☒ Addition	
NAME				2.2 NAME	HERBERT JIM COHEN, ESQ.		
STREET ADDRESS				2.3 STREET ADDRESS	9400 S. DADELAND BLVD. #600		
CITY - ST - ZIP				2.4 CITY - ST - ZIP	MIAMI FL 33156		
TITLE			☐ DELETE	3.1 TITLE	☐ Change	☐ Addition	
NAME				3.2 NAME	200002308762 -- 8		
STREET ADDRESS				3.3 STREET ADDRESS	-10/01/97--01073--010		
CITY - ST - ZIP				3.4 CITY - ST - ZIP	***\$550.00 ***\$550.00		
TITLE			☐ DELETE	4.1 TITLE	☐ Change	☐ Addition	
NAME				4.2 NAME			
STREET ADDRESS				4.3 STREET ADDRESS			
CITY - ST - ZIP				4.4 CITY - ST - ZIP			
TITLE			☐ DELETE	5.1 TITLE	☐ Change	☐ Addition	
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS			
CITY - ST - ZIP				5.4 CITY - ST - ZIP			
TITLE			☐ DELETE	6.1 TITLE	☐ Change	☐ Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY - ST - ZIP				6.4 CITY - ST - ZIP			

14. I do 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 on an attachment with an address.

SIGNATURE: *Carolina Gonzalez-Carajal* 9-3-97 214-362-8806

CR2E034 (4/97)