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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080521 (3)

GUYCO DEVELOPERS INC.

FILED May 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address 9731 SW 190TH ST 9731 SW 190TH ST MIAMI FL 33157 **MIAMI FL 33157** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/30/1996 Applied For 2. Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0730834 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **GUY. CHESTER** 9731 SW 190TH ST 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33157** 83 84 City 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, typicd or printed name of registered agent and title if applicable (NOTI Registered Agent signature required when reinstating) CR2E034 (10/97 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE Change ☐ Addition D 1.1 TITLE President TITLE NAME **GUY. CHESTER** 1.2 NAME 9731 SW 190TH ST STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33157** CITY-ST-ZIP 1.4 CITY - ST- ZIP DELETE TREASUREMY Change Addition 2.1 TITLE TITLE NAME vogel, santo j 2.2 NAME 1900 SOUTH OCEAN BLVD STREET ADDRESS 2.3 STREET ADDRESS **POMPANO BEACH FL** 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 City-St-7iP CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5 4 CITY - ST - ZIP DELETE Addition Change TITLE 6.1 TITLE 6.2 NAME NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing does not qualify for the exemblion stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental approach to the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

Salina 4/20/2 ADI DOS 111