

2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P97000062700

1. Entity Name

GUEITS ENTERPRISE, INC.

FILED
May 15, 2001 8:00 am
Secretary of State

05-15-2001 90141 002 ***150.00

Principal Place of Business

5518 NW 114 AVE STE 101
 MIAMI FL 33178

Mailing Address

5518 NW 114 AVE STE 101
 MIAMI FL 33178

2. Principal Place of Business

600 Hunting Lodge Dr.

3. Mailing Address

600 Hunting Lodge Dr.

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

Miami Springs, FL

City & State

Miami Springs, FL

Zip

Country

33166

Zip

Country

33166

4. FEI Number

65-0768009

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

GUEITS, CARLOS F.
 5518 NW 114 AVE STE 101
 MIAMI FL 33178

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible
 Tax filing requirement and elects to do so.
 (See criteria on back)

X

FILE NOW!!! FEE IS \$150.00
After MAY 1, 2001 Fee will be \$550.00
Make Check Payable to Department of State

10. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE PSTD
 NAME GUEITS, CARLOS F
 STREET ADDRESS 5518 NW 114 AVE STE 101
 CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE VD
 NAME GUEITS, HEATHER L.
 STREET ADDRESS 5518 NW 114 AVE STE 101
 CITY-ST-ZIP MIAMI FL 33178 ☐ Delete

TITLE ☐ Change ☐ Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
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 STREET ADDRESS
 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Heather L. Gueits*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/01

Date

(305)329-2062

Daytime Phone #

CR2E034 (10/00)