FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # P97000074540

1. Corporation Name

GUERRA PROPERTY MAINTENANCE, INC.

| Princ | ipal | Place | e of | Busin |
|-------|------|-------|------|-------|
| 13539 | SW | 9TH | LAN | ŧΕ |

Mailing Address

FILED Mar 01, 1999 8:00 am Secretary of State

03-01-1999 90014 010 ***150.00



| Principal Flace of Business Walling Address | | | | | | | |
|---|-------------------------------------|-------|--|--|--|--|--|
| 13539 SW 9TH LANE Miami FL 33184 | 13539 SW 9TH LANE MIAMI FL 33184 | | DO NOT WRITE IN THIS SPACE | | | | |
| | | | | | | | |
| | | | 3. Date Incorporated or Qualifed 08/27/1997 | | | | |
| Principal Place of Business 2a. Mailing Address | | | 4. FEI Number Applied For | | | | |
| 1 | 26 | | 65-0778332 Not Applicable | | | | |
| Suite, Apt. #, etc. | Suite, Apt. #, etc. | | 5. Certifcate of Status Desired \$8.75 Additional Fee Required | | | | |
| City & State- | City & State | | 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees | | | | |
| Zip Country | Zip Cou | untry | try 8. This corporation owes the current year Intangible Personal Property Tax. 口Yes 内No | | | | |
| 9. Name and Address of Current Registered Agent | | | 10. Name and Address of New Registered Agent | | | | |
| TRAVERIA-GONZALEZ, CAR | | 81 | 81 Name | | | | |
| 1621 SW 15 STREET | | | Street Address (P.O. Box Number is Not Acceptable) | | | | |
| MIAMI FL 33145 | | 83 | | | | | |
| | | 84 | | | | | |
| | | | | | | | |

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 | URE (PROSTED STATE OF STATE O | | | | 4.300 | | | | |
|----------------|--|----------|--------------------------|----------------------------|--------------|------------|-----------------|------------|--|
| | Signature, typed or printed name of registered agent and title if applicab | <u>.</u> | gistered Agent signature | required when reinstating) | | DATE | | | |
| 12. | OFFICERS AND DIRECTORS | | 13. | ADDITIONS | CHANGES TO O | FFICERS AN | | | |
| TITLE | PD | ☐ DELETE | 1.1 TMLE | | | | Change | ☐ Addition | |
| NAME | GUERRA, GREGORIO J | | 1.2 NAME | | | | | | |
| STREET ADDRESS | 13539 SW 9TH LANE | | 1.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | MIAMI FL <u>33184</u> | | 1.4 CITY-ST-ZIP | | _ | | | | |
| TITLE | V O | ☐ DELETE | 2.1 TITLE | | | | L Change | ☐ Addition | |
| NAME | COUCEYRO-GUERRA, TERESITA | | 2.2 NAME | C OUCEYRU, | TERESITY | 4 | | | |
| STREET ADDRESS | 13539 SW 9TH LANE | | 2.3 STREET ADDRESS | 7 7 | | | | | |
| CITY-ST-ZIP | MIAMI FL 33184 | | 2.4 CITY-ST-ZIP | | | | | | |
| TITLE | | ☐ DELETE | 3.1 TITLE | | | | Change | ☐ Addition | |
| NAME | | | 3.2 NAME | | <u>.</u> . | | | | |
| STREET ADDRESS | | | 3.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | , <u></u> | | | | | |
| 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 | | | | | | |
| TIRLE | | ☐ DELETE | 5.1 TITLE | | • | | Change | Addition | |
| NAME | | | 5.2 NAME | | | | | | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | | | 5.4 CITY- ST-ZIP | ļ | | | | | |
| 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 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, with all other like empowered.