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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9700088010

GUILLOT INVESTMENT CORPORATION

Principal Place of Business						
17929 CACHET ISLE. CORY LAKE ISLES						

TAMPA FL 33647-2703

21

2. Principal Place of Business

Suite Ant # etc

Mailing Address

2a. Mailing Address

Suite Ant # etc

26

17929 CACHET ISLE, CORY LAKE ISLES TAMPA FL 33647-2703

FILED Jan 29, 1999 8:00am **Secretary of State**

01-29-1999 90046 050 ***150.00



DO NOT WRITE IN THIS SPACE

Applied For

Not Applicable

3. Date Incorporated or Qualifed

10/10/1997

59-3473818

4: FEI Number

22	27					5. Certifcate of Statu	s Desired 📌 🔲	Fee Re		
	City & State City & State					6. Election Campaign	Financing	\$5.00	May Be	
23	28					Trust Fund Contrit	oution	Added		
Zip	Country	Zip	Cou 30	ntry		8. This corporation o	•		tra .	
24						Personal Property Tax. Yes No				
	9. Name and Address of Current			041		10. Name and Addre	ss of New Registe	red Agent		
· CIN	LOT EDWIN I			81	Name					
GUILLOT, EDWIN J 17929 CACHET ISLE; CORY LAKE ISLES				82	Street Addre	ddress (P.O. Box Number is Not Acceptable)				
TAM	TAMPA FL 33647-2703					1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	18.4 St 18.0 4 A C. T.	27 Let - 1 17.51	100	
					•	- 清陽 14 %	- 1月代代: [1]			
a encare i su pre esta d	por construction	y months and a strong process and a		84	City		r savej mir var ste agest a	-L	Code Code	
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Stat	utes, the at	oove-	named corpo	oration submits this state	ment for the purpos	e of changing its	registered	
agent. I a	registered agent, or both, in the State of im familiar with, and accept the obligation	ons of, Section 607.0505, F	lorida Statu	ites.	ne corporatio	on a poard or directors. I f	ereby accept the ap	sponument as re	gistered	
SIGNATURE					•					
SIGNATORE	Signature, typed or printed name of registered agent	and title if applicable. (NO	TE: Registered	Agent :	signature required	d when reinstating) : () []	DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHAN	GES TO OFFICERS			
TITLE	PD	□ DELETE	1.1 TIT	LE		gerax mass		Change	☐ Addition	
NAME				ME		•		•		
STREET ADDRESS				1.3 STREET ADDRESS			•			
CITY-ST-ZIP	TAMPA FL 33647-2703			Y+ST-	ZIP			<u> </u>	•	
TITLE	STD	STD DELETE		2.1 TITLE			•	☐ Change	☐ Addition	
NAME	GUILLOT, ELMISSA V		2.2 NA	2.2 NAME		•		•	•	
STREET ADDRESS		(E ISLES	2.3 STI	REETA	ADORESS		•			
CITY-ST-ZIP	TAMPA FL 33647-2703	1.4 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.	2. 4 CI	TY-ST	-ZIP			· • · •	***	
TITLE	VD	DELETE	3.1 TIT	-				. Change	☐ Addition	
NAME (1867)	GUILLOT, EDWIN J JR	1	3.2 NA	ME						
STREET ADDRESS	17929 CACHET ISLE, CORY LAN				NODRESS .				a a ho adio	
CITY-ST-ZIP	TAMPA FL 33647-2703	ic iveby	3.4. CI					经营销额	1 1	
TITLE	VD	. DELETE	4.1 111		- <u>-</u>			Change ·	Addition	
	GUILLOT, EMILSA J		4, 2 NA					· · · · · · · · · · · · · · · · · · ·		
NAME STREET ADDRESS		F ISLES			DORESS	•				
CITY-ST-ZIP	TAMPA FL 33647-2703	L IJLLU				•	, .			
TITLE	TAME A LE GOOTI-ZIOG		4,4 CIT 5.1 TITI		ZIP .		<u> </u>	☐ Change	☐ Addition	
NAME	· • •		5.1 Hr			ger gegyn		☐ Orlange		
	,				DORESS	\$ 1 × 2, 6				
STREET ADDRESS	PD .		. •			garage to the second	•	•		
CITY-ST-ZIP	DOSCALL CONTRACT	☐ DELETE	5.4 CIT 6.1 TIT		ZIP .		• • • •	- Charit		
TITLE								Change	☐ Addition	
NAME	TO SECOND	ton	6.2 NA			•				
STREET ADDRESS					DDRESS	•			•	
CHY-SI-ZIP			6.4 CIT							
 14. I hereby control indicated 	ertify that the information supplied with on this annual report or supplemental a	this filing does not qualify fi neural report is true and acc	for the exen	nption	n stated in So ny signature	ection 119.07(3)(i), Florid shall have the same lega	a Statutes. I further Il effect as if made i	certify that the in	nformation 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 attachment with an address, with all other like empowered.