## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000103457

Entity Name: GUASCOR, INC.

FILED Jan 09, 2004 Secretary of State

Current Principal Place of Business:	New Principal Place of Business:
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7220 N.W. 36TH STREET SUITE 310

MIAMI, FL 33166 US

Current Mailing Address: New Mailing Address:

7220 N.W. 36TH STREET SUITE 310 MIAMI, FL 33166 US

FEI Number: 65-0807511 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

PAITUVI, MARTIN
7220 NW 36 STREET SUITE 340
MIAMI, FL 33166 US

REINER, SAMUEL B ESQ.
9100 SOUTH DADELAND BLVD.
SUITE 1408

MIAMI, FL 33166 US SUITE 1408 MIAMI, FL 33156 US

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: SAMUEL B. REINER 01/09/2004

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D () Delete Title: () Change () Addition

 Name:
 FRANCO, JOSE M
 Name:

 Address:
 7220 NW 36 ST, SUITE 310
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: DP ( ) Delete Title: DP (X) Change ( ) Addition

 Name:
 PAITUVI, MARTIN
 Name:
 CRAIG, GABRIEL D

 Address:
 7220 NW 36 ST, SUITE 310
 Address:
 7220 NW 36 ST, SUITE 310

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:
 MIAMI, FL 33166

Title: D ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GRAJALES, JOSEBA
 Name:

 Address:
 7220 NW 36 ST, SUITE 310
 Address:

 City-St-Zip:
 MIAMI, FL 33166
 City-St-Zip:

Title: S () Delete Title: S (X) Change () Addition
Name: ESTRADA, IGNACIO Name: REINER, SAMUEL B

Address: 7220 NW 36 ST SUITE 340 Address: 9100 S. DADELAND BLVD., SUITE 1408

City-St-Zip: MIAMI, FL 33166 City-St-Zip: MIAMI, FL 33156

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAMUEL B. REINER S 01/09/2004