

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 04, 2006 8:00 am
Secretary of State

05-04-2006 90203 041 ***150.00

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1. Entity Name
GUYAMERICAN PROPERTY MANAGEMENT, INC.



Principal Place of Business

729 N. PINE HILLS RD.
ORLANDO, FL 32808

Mailing Address

130-55A 127 STREET
SOUTH OZONE PARK, NY 11420

DO NOT WRITE IN THIS SPACE



04282006 No Chg-P CR2E034 (11/05)

4. FEI Number
59-3580899

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

PHEKOO, G.
729 N. PINE HILLS RD
ORLANDO, FL 32808

**DO NOT WRITE
IN THIS SPACE**

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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2006 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	VPD
NAME	SINGH, MAHENDRA
STREET ADDRESS	729 N. PINE HILLS RD.
CITY-ST-ZIP	ORLANDO, FL 32808
TITLE	PD
NAME	PHEKOO, GUYAMCHAND A
STREET ADDRESS	729 N. PINE HILLS RD.
CITY-ST-ZIP	ORLANDO, FL 32808
TITLE	TD
NAME	SINGH, BALJIT
STREET ADDRESS	729 N. PINE HILLS RD.
CITY-ST-ZIP	ORLANDO, FL 32808
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Baljit Singh* *Baljit Singh* 04-28-06 407-578-4973

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #