

**2024 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P13000060691

**Entity Name:** GUARITOTO INVESTMENTS INC

**Current Principal Place of Business:**

8949 SW 172ND AVE  
APT. # 1517  
MIAMI, FL 33196-3033

**Current Mailing Address:**

8949 SW 172ND AVE  
APT. # 1517  
MIAMI, FL 33196-3033 US

**FEI Number:** 46-3447027

**Certificate of Status Desired:** No

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

ALBER TAX ACCOUNTANT  
11401 SW 40TH ST STE 365  
MIAMI, FL 33165 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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP	Title	VP
Name	LONGOBARDI, PAUL	Name	LONGOBARDI, RORAIMA
Address	8949 SW 172ND AVE APT. # 1517	Address	8949 SW 172ND AVE APT. # 1517
City-State-Zip:	MIAMI FL 33196-3033	City-State-Zip:	MIAMI FL 33196-3033
Title	TREASURER	Title	SECRETARY
Name	LONGOBARDI, PAUL A	Name	LONGOBARDI, RAFAEL
Address	8949 SW 172ND AVE APT. # 1517	Address	8949 SW 172ND AVE APT. # 1517
City-State-Zip:	MIAMI FL 33196-3033	City-State-Zip:	MIAMI FL 33196-3033
Title	PRESIDENT		
Name	LONGOBARDI, CLARA		
Address	8949 SW 172ND AVE APT. # 1517		
City-State-Zip:	MIAMI FL 33196-3033		

*I hereby 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 all other like empowered.*

**SIGNATURE:** PAUL LONGOBARDI

MR

01/04/2024

Electronic Signature of Signing Officer/Directo

Date