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PROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S25203

1. Corporation Name
GUARDIAN CONSTRUCTION CORPORATION

Principal Place of Business	Mailing Address
5455 N FEDERAL HWY STE I BOCA RATON FL 33487 US	5455 N FEDERAL HWY STE I BOCA RATON FL 33487 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 01/16/1991
4. FEI Number: 65-0237962 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
8. This corporation owes the current year Intangible Personal Property Tax. ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 5455 N FEDERAL HWY	26 C/O RICHARD L HAAR
Suite, Apt. #, etc. 22 STE I	Suite, Apt. #, etc. 27 10 MIDLAND ROAD
City & State 23 BOCA RATON FL	City & State 28 ROSLYN HEIGHTS NY
Zip 24 33487 Country 25 PALM BEACH	Zip 29 11577 Country 30 NASSAU

9. Name and Address of Current Registered Agent

EISENROD, MICHAEL S
5455 N FEDERAL HWY
STE I
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

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 [signature] 3/30/90
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TS ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HARTLEY, NANCY	1.2 NAME	
STREET ADDRESS	5455 N FEDERAL HWY, STE I	1.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33487	1.4 CITY-ST-ZIP	
TITLE	PAS ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	EISENROD, MICHAEL S	2.2 NAME	
STREET ADDRESS	5455 N FEDERAL HWY, STE I	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOCA RATON FL 33487	2.4 CITY-ST-ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
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	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
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	

CR2E034 (11/98)

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.

SIGNATURE: [signature] CPA RICHARD L HAAR 4/1/99 516-484-1455
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ME [signature] MICHAEL EISENROD 4/1/99 561-447-8191