2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039787

GASTEAZORO, ALFREDO

10145 NW 19 STREET

MIAMI, FL 33172

Name:

Address:

City-St-Zip:

Entity Name: ON GUARD SECURITY AND INVESTIGATIONS, INC.

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 8895 N. MILITARY TRAIL SUITE 206 E PALM BEACH GARDENS, FL 33410 **New Mailing Address: Current Mailing Address:** 10145 N.W. 19 STREET MIAMI, FL 33172 FEI Number: 65-0871708 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: GASTEAZORO, ALFREDO FLYNN, SEAN 10145 N.W. 19 STREET 10145 N.W. 19 STREET MIAMI, FL 33172 MIAMI, FL 33172 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: SEAN FLYNN 04/30/2007 Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition FARRELL, RONALD Name: Name: 10145 N.W. 19 STREET Address: Address: City-St-Zip: MIAMI, FL 33172 City-St-Zip: Title: Title: () Delete () Change () Addition Name: MILLS, ROBERT Name: 10145 N.W. 19 STREET Address: Address: MIAMI, FL 33172 City-St-Zip: City-St-Zip: () Delete Title: Title: (X) Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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.

Name:

Address:

City-St-Zip:

FLYNN, SEAN

MIAMI, FL 33172

10145 NW 19 STREET

SIGNATURE: SEAN FLYNN O 04/30/2007