2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000041104

Entity Name: GUARDIAN CARE SERVICES, INC.

FILED Jan 10, 2006 Secretary of State

Current Principa	al Place of Business:	New Principal Place of Business:

5777 NW 151 ST. MIAMI LAKES, FL 33014

Current Mailing Address: New Mailing Address:

5777 NW 151 ST. MIAMI LAKES, FL 33014

FEI Number: 65-1002103 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:

CAMPOS, ANA L
4285 SW 185 AVE
MIRAMAR, FL 33029
US

CAMPOS, ANA L
13728 SW 31ST STREET
MIRAMAR, FL 33027
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: ANA L. CAMPOS 01/10/2006

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P () Delete Title: P (X) Change () Addition Name: CAMPOS, ANA L Name: CAMPOS, ANA L

 Address:
 4285 SW 185 AVE.
 Address:
 13728 SW 31STREET

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33027

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

 Name:
 BILBAO, ERKYS M
 Name:
 BILBAO, ERKYS M

 Address:
 4285 SW 185 AVE.
 Address:
 3731 SW 144TH AVE

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33027

 Name:
 BILBAO, ALEXANDER
 Name:
 BILBAO, ALEXANDER

 Address:
 4285 SW 185 AVE
 Address:
 13728 SW 31ST STREET

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33027

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

 Name:
 BILBAO, MAITE E
 Name:
 BILBAO-RIVERO, MAITE E

 Address:
 4285 SW 185 AVE
 Address:
 13788 SW 31ST STREET

 City-St-Zip:
 MIRAMAR, FL 33029
 City-St-Zip:
 MIRAMAR, FL 33027

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

SIGNATURE: ANA L. CAMPOS PRES 01/10/2006