2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000118188

Entity Name: WEALTH GUARD INCORPORATED

FILED Aug 17, 2008 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
14748 SW	56 STREET			18549 PINE	ES BLVD		
205				181			
MIAMI, FL	33185			PEMBROK	E PINES, F	FL 33029	
Current Mailing Address:				New Mailing Address:			
	56 STREET			18549 PINE	ES BLVD		
205	00405			181			
MIAMI, FL	33185			PEMBROK	E PINES, F	-L 33029	
FEI Number	: 13-4222605	FEI Number Applied For ()	FEI Num	nber Not Appl	icable ()	Certificate of Status	Desired ()
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
205	ERRY 56 STREET 33185 US						
IVIII—IVIII, I L	33103 00						
The above in the State	e named entity e of Florida.	submits this statement for the	purpose of	f changing it	ts registere	d office or registered a	agent, or both,
SIGNATUI	RE:						
	Electro	nic Signature of Registered Ag	ent	Date			
		93(2)(b), F.S., the corporation did nog g Trust Fund Contribution ().	ot receive th	ne prior notic	e.		
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title:	D () Delete		Title:	D	(X) Change () Addition	
Name:	CHACON, CAR			Name:	RAMIREZ,	• • •	
Address:	14748 SW 56			Address:		56 STREET #205	
City-St-Zip:	MIAMI, FL 33			City-St-Zip:	MIAMI, FL		
Title:	S () Delete		Title:		() Change () Addition	
Name:	OROZCO, AL			Name:			
Address:	14748 SW 56	STREET #205		Address:			
City-St-Zip:	MIAMI, FL 33			City-St-Zip:			
Title:	T () Delete		Title:		() Change () Addition	
Name:	CHACON, MAR	RTHA		Name:			
Address:	14748 SW 56			Address:			
City-St-Zip:	MIAMI, FL 33°	185		City-St-Zip:			

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.

SIGNATURE: GEOVANNI RAMIREZ D 08/17/2008