

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000018159

FILED
Feb 10, 2009
Secretary of State

Entity Name: GUARDIAN CARE SERVICES OF BROWARD, INC.

Current Principal Place of Business:

3350 SW 148 AVE
134
MIRAMAR, FL 33027

New Principal Place of Business:

Current Mailing Address:

3731 SW 144TH AVENUE
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 16-1655983

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BILBAO, ERKYS M
3731 SW 144TH AVENUE
MIRAMAR, FL 33027 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: BILBAO, ERKYS M
Address: 3731 SW 144TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: BILBAO, ERKYS M
Address: 3731 SW 144TH AVENUE
City-St-Zip: MIRAMAR, FL 33027

Title: VT () Delete
Name: BILBAO, ALEXANDER
Address: 13728 SW 31ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: T () Delete
Name: BILBAO, ALEXANDER
Address: 13728 SW 31ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: S () Delete
Name: BILBAO-RIVERO, MAITE E
Address: 13788 SW 31ST STREET
City-St-Zip: MIRAMAR, FL 33027

Title: S () Delete
Name: BILBAO, CASTOR M
Address: 3731 SW 144 AVENUE
City-St-Zip: MIRAMAR, FL 33027

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: ERKYS M. BILBAO

P

02/10/2009

Electronic Signature of Signing Officer or Director

Date