

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000036433

FILED
Apr 27, 2007
Secretary of State

Entity Name: GUARDIAN FINANCIAL MORTGAGE CORP.

Current Principal Place of Business:

2800 W. CYPRESS CREEK RD.
SUITE 100
FORT LAUDERDALE, FL 33309

Current Mailing Address:

2800 W. CYPRESS CREEK RD.
SUITE 100
FORT LAUDERDALE, FL 33309

New Principal Place of Business:

2800 W. CYPRESS CREEK RD.
SUITE 200
FORT LAUDERDALE, FL 33309

New Mailing Address:

2800 W. CYPRESS CREEK RD.
SUITE 200
FORT LAUDERDALE, FL 33309

FEI Number: 20-4477862

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LAW OFFICES OF LAWRENCE E. BLACK, P.A.
3326 NE 33RD STREET
FORT LAUDERDALE, FL 33308 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: S () Delete
Name: MOSCARIELLO, LES
Address: 16034 E. PIMLICO DR.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: PVPT () Delete
Name: MOSCARIELLO, LES
Address: 16034 E. PIMLICO DR.
City-St-Zip: LOXAHATCHEE, FL 33470

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PRES (X) Change () Addition
Name: MOSCARIELLO, LES
Address: 16034 E. PIMLICO DR.
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: VP (X) Change () Addition
Name: MOSCARIELLO, LES
Address: 16034 E. PIMLICO DR.
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: SEC () Change (X) Addition
Name: MOSCARIELLO, LES
Address: 16034 E. PIMLICO DR.
City-St-Zip: LOXAHATCHEE, FL 33470 US

Title: TREA () Change (X) Addition
Name: MOSCARIELLO, LES
Address: 16034 E. PIMLICO DR.
City-St-Zip: LOXAHATCHEE, FL 33470 US

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: LES MOSCARIELLO

PRES

04/27/2007

Electronic Signature of Signing Officer or Director

Date