## 2008 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

## DOCUMENT# P99000008806

Address:

City-St-Zip:

Entity Name: GUARANTY REALTY & INVESTMENTS, INC.

FILED Aug 20, 2008 Secretary of State

Littly Nai	IIIe. GOARAI	NTT REALTT & INVESTIMENT	o, iivo.					
Current Principal Place of Business:				New Principal Place of Business:				
1806 N. FLAMINGO ROAD SUITE 314 PEMBROKE PINES, FL 33028				1806 N. FLAMINGO ROAD SUITE 314 PEMBROKE PINES, FL 33028 US				
Current Mailing Address:				New Mailing Address:				
1806 N. FLAMINGO ROAD SUITE 314 PEMBROKE PINES, FL 33028				5401 S. KIRKMAND ROAD SUITE 310 ORLANDO, FL 32819 US				
FEI Number:	: 65-0896950	FEI Number Applied For ( )	FEI Nun	nber Not Appl	icable ( )	Certifica	ate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:				
SUITE 310 ORLANDO	RKMAN ROAI ) ), FL 32819 l	JS		£ _ b _ u _ u ; u _ u ;	<b>.</b>	-#:		
	e named entity e of Florida.	submits this statement for the	purpose o	t changing i	ts registered (	onice or r	egistered agent, or both,	
SIGNATU	RE:							
	Electro	nic Signature of Registered Ag	ent				Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS				
Title: Name: Address: City-St-Zip:	GARCIA, FRAN	S POINT DRIVE		Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	RODRIGUEZ,	IAN ROAD SUITE 310		Title: Name: Address: City-St-Zip:	(	) Change	( ) Addition	
Title: Name: Address: City-St-Zip:	RIVAS, RALPH	1AN RAOD SUITE 310		Title: Name: Address: City-St-Zip:	VP () GARCIA, LILLI 5401 S. KIRKI ORLANDO, FL	IÁN P MAN ROAD		
Title: Name: Address: City-St-Zip:	T ( PEREZ, ROBE 5401 S. KIRKN ORLANDO, FL	1AN ROAD		Title: Name: Address: City-St-Zip:	S () RIVAS, RALPH 5401 S. KIRKN ORLANDO, FL	Í A MAN ROAD		
Title: Name:	(	) Delete		Title: Name:	T ( PEREZ, ROBE		(X) 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.

Address:

City-St-Zip:

5401 S. KIRKMAN ROAD ORLANDO, FL 32819 US

SIGNATURE: RALPH RIVAS S 08/20/2008