

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

FILED
Mar 05 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S25203** (8)
1. Corporation Name
GUARDIAN CONSTRUCTION CORPORATION



Principal Place of Business 675 E CLEARBROOK CIR DELRAY BEACH FL 33445 US	Mailing Address 675 E CLEARBROOK CIR DELRAY BEACH FL 33445 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 5455 N. Federal Hwy. Suite, Apt. #, etc. 22 Suite I City & State 23 Boca Raton, FL Zip 24 33487		2a. Mailing Address 26 SAME Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country 30 USA		3. Date Incorporated or Qualified 01/16/1991	
		4. FEI Number 65-0237962		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent

**EISENROD, MICHAEL S
675 E. CLEARBROOK CIRCLE
DELRAY BEACH FL 33445**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	5455 N. Federal Highway
83	Suite I
84 City	Boca Raton, FL
85 Zip Code	33487

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Michael S. Eisenrod* **Michael S. Eisenrod** **2/23/98**
Signature, typed or printed name of registered agent and not applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input checked="" type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME EISENROD, SOLOMON		1.2 NAME	
STREET ADDRESS 675 E CLEARBROOK CIR		1.3 STREET ADDRESS	
CITY-ST-ZIP DELRAY BEACH FL 33445		1.4 CITY-ST-ZIP	
TITLE VP	<input type="checkbox"/> DELETE	2.1 TITLE	President & Asst Sec. <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME EISENROD, MICHAEL S		2.2 NAME	Eisenrod, Michael S.
STREET ADDRESS 675 E CLEARBROOK CIR		2.3 STREET ADDRESS	5455 N. Federal Hwy., Suite I
CITY-ST-ZIP DELRAY BEACH FL 33445		2.4 CITY-ST-ZIP	Boca Raton, FL 33487
TITLE S	<input checked="" type="checkbox"/> DELETE	3.1 TITLE	Secretary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME EISENROD, SOLOMON		3.2 NAME	Nancy Hartley
STREET ADDRESS 675 E CLEARBROOK CIR		3.3 STREET ADDRESS	5455 N. Federal Hwy., Suite I
CITY-ST-ZIP DELRAY BEACH FL 33445		3.4 CITY-ST-ZIP	Boca Raton, FL 33487
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	Treasurer <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Nancy Hartley
STREET ADDRESS		4.3 STREET ADDRESS	5455 N. Federal Hwy., Suite I
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Boca Raton, FL 33487
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Michael S. Eisenrod* **Michael S. Eisenrod** **2/23/98** **541/994-1237**

CR2E034 (10/97)