


2004 FOR PROFIT CORPORATION
ANNUAL REPORT

FILED
Feb 04, 2004 8:00 am
Secretary of State

02-04-2004 90093 015 ***158.75

DOCUMENT # V67959 1. Entity Name EXPERT GUARDIAN SERVICES, INC.	
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Principal Place of Business 2186 NE 56 CT FT LAUDERDALE, FL 33308-2500 US	Mailing Address P.O. BOX 11732 FT LAUDERDALE, FL 33339-1732
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01062004 No Chg-P CR2E034 (10/03)

4. FEI Number 65-0367507	Applied For Not Applicable
5. Certificate of Status Desired <input checked="" type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent HIROTA, LYNDIA 2175 NE 56 COURT FORT LAUDERDALE, FL 33308	Werner Hinz 2192 NE 56th Ct. #2 Ft. Lauderdale, FL 33308
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**DO NOT WRITE
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.	SIGNATURE: 	DATE: 01-06-04
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Signature, typed or printed name of registered agent and title if applicable.

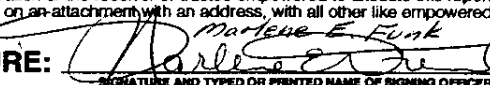
(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!!! FEE IS \$150.00 After May 1, 2004 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FUNK, MARLENE E. 2186 NE 56 CT FT LAUDERDALE, FL
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12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.	SIGNATURE:  President	DATE: 01-06-04	DAYTIME PHONE #: (954) 491-0000
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

DAYTIME PHONE #