

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000156340

**FILED**  
**Jan 08, 2008**  
**Secretary of State**

**Entity Name:** GUARANTEED MORTGAGE CONSULTANTS, INC.

**Current Principal Place of Business:**

22493 BAYVIEW DRIVE  
ST. CLAIR SHORES, MI 48081

**New Principal Place of Business:**

1514 E 11 MILE RD  
ROYAL OAK, MI 48081

**Current Mailing Address:**

22493 BAYVIEW DRIVE  
ST. CLAIR SHORES, MI 48081

**New Mailing Address:**

1514 E 11 MILE RD  
ROYAL OAK, MI 48081

FEI Number: 20-0454440

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired (X)

**Name and Address of Current Registered Agent:**

CORPORATE CREATIONS NETWORK INC.  
11380 PROSPERITY FARMS RD #221E  
PALM BEACH GARDENS, FL 33410 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: BITTO IV, LOUIS H  
Address: 22493 BAYVIEW DRIVE  
City-St-Zip: ST. CLAIR SHORES, MI 48081

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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: LOUIS BITTO

PRES

01/08/2008

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date