2000 UNIFORM BUSINESS REPORT (UBR) FILED Apr 22, 2000 8:00 am Secretary of State **DOCUMENT # G68096** ELITE GUARD AND PATROL SERVICES, INC. 04-22-2000 90011 006 ***150.00 Mailing Address Principal Place of Business 17100 COLLINS AVE 17100 COLLINS AVE 94VV~~ SUITE 222 SUITE 222 MIAMI BEACH FL 33160-3675 MIAMI BEACH FL 33160 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State City & State 4. FEI Number 59-2364658 Not Applicable Country \$8.75 Additional Zip Zip Country 5. .Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name **BUFFINGTON, KEVIN** Street Address (P.O. Box Number is Not Acceptable) 17100 COLLINS AVE SUITE 222 MIAMI BEACH FL 33160 Zip Code FL 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. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. FILE NOW!!! FEE IS \$150.00 9. This corporation is eligible to satisfy its Intangible 10. Election Campaign Financing **\$5.00** May Be After MAY 1, 2000 Fee will be \$550.00 Tax filing requirement and elects to do so. Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 12. 11. Change ☐ Addition ☐ Delete TITLE TITLE BUFFINGTON, KIMLY M. NAME NAME STREET ADDRESS 17100 COLLINS AVENUE, STE. 222 STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP MIAMI BEACH FL 33160 ☐ Delete TITLE Change ☐ Addition TITLE **BUFFINGTON, KENNETH** NAME NAME 17100 COLLINS AVENUE, SUITE 222 STREET ADDRESS STREET ADDRESS CITY-ST-7IP MIAMI BEACH FL 33160 CITY-ST-ZIP ☐ Delete Change Addition TITLE TITLE **BUFFINGTON, BETTY** NAME NAME 17100 COLLINS AVENUE, SUITE 222 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE BUFFINGTON, KEVIN NAME NAME 17100 COLLINS AVENUE, SUITE 222 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP ☐ Addition Change ☐ Delete TITLE NAME

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

STREET ADDRESS

STREET ADDRESS CITY-ST-ZIP

CITY-ST-7IP

TITLE

NAME

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Delete

4/1/50 Date

305.956.9520

Daytime Phone #

Change

☐ Addition