2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 27, 2001 08:00 AM G68096 DOCUMENT # 1. Entity Name **Secretary of State** ELITE GUARD AND PATROL SERVICES, INC. Principal Place of Business Mailing Address 17100 COLLINS AVE 17100 COLLINS AVE SUITE 222 SUITE 222 MIAMI BEACH FL MIAMI BEACH FL33160 33160 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE City & State City & State 4. FEI Number Applied For 59-2364658 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BUFFINGTON KEVIN 17100 COLLINS AVE Street Address (P.O. Box Number is Not Acceptable) SUITE 222 MIAMI BEACH FL33160 Zip Code 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 04/27/2001 Signature, typed or printed name of registered agent and title if applicable, (NOTE: Registered Agent signature required when reinstating) 9. This corporation is eligible to satisfy its Intangible FILE NOW!!! FEE IS \$150.00 10. Election Campaign Financing \$5.00 May Be Tax filing requirement and elects to do so. After MAY 1, 2001 Fee will be \$550.00 Trust Fund Contribution. Added to Fees (See criteria on back) Make Check Payable to Department of State OFFICERS AND DIRECTORS 11. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TITLE CR2E034 (11/00) ☐ Delete TITLE ☐ Addition BUFFINGTON, KEVIN MAME NAME 17100 COLLINS AVENUE, SUITE 222 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP PD ☐ Delete TITLE ☐ Change NAME BUFFINGTON, BETTY NAME STREET ADDRESS 17100 COLLINS AVENUE, SUITE 222 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition BUFFINGTON, KENNETH NAME STREET ADDRESS 17100 COLLINS AVENUE, SUITE 222 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH FL 33160 CITY-ST-ZIP Delete Сhапде TITLE Addition BUFFINGTON, KIMLY M. NAME STREET ADDRESS 17100 COLLINS AVENUE, STE. 222 STREET ADDRESS CITY-ST-ZIP MIAMI BEACH 33160 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

04/27/2001

Date

Daytime Phone #

SIGNATURE: _Kevin Buffington

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR