

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

FILED
Feb 06 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT **1998**



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # P29758 (0)
 1. Corporation Name
PROFESSIONAL SECURITY BUREAU, LTD., INC.



Principal Place of Business: **88 PARK AVENUE NUTLEY NJ 07110**
 Mailing Address: **88 PARK AVENUE NUTLEY NJ 07110**

DO NOT WRITE IN THIS SPACE

21	2. Principal Place of Business	26	2a. Mailing Address
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.
23	City & State	28	City & State
24	Zip	29	Country
25	Country	30	Country

3. Date Incorporated or Qualified: **06/14/1990**

4. FEI Number: **11-2142118**
 Applied For: Not Applicable

5. Certificate of Status Desired: **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution: **\$5.00 May Be Added to Fees**

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
**CT CORPORATION SYSTEM
 1200 S. PINE ISLAND ROAD
 PLANTATION FL 33324**

10. Name and Address of New Registered Agent

81 Name
 82 Street Address (P.O. Box Number is Not Acceptable)
 83
 84 City **FL** 85 Zip Code

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 _____ (Signature typed or printed name of registered agent and ticked if applicable) (NOT: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	ROCKWELL, RICHARD DEAN	
STREET ADDRESS	27 GLASGOW TERRACE	
CITY-ST-ZIP	MAHWAH NJ	
TITLE	V	<input type="checkbox"/> DELETE
NAME	GOODE, DOUGLAS	
STREET ADDRESS	17 HANCOCK CT	
CITY-ST-ZIP	PLAINSBORO NJ	
TITLE	T	<input type="checkbox"/> DELETE
NAME	ARNESMAN, RICHARD S	
STREET ADDRESS	115-206 HILLTOP RD	
CITY-ST-ZIP	KINNELON NJ	
TITLE	S	<input type="checkbox"/> DELETE
NAME	LONGENDYCK, ANN M	
STREET ADDRESS	87 MAJOR STREET	
CITY-ST-ZIP	CLIFTON NJ	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SR. VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BRENNER, WILLIAM	
1.3 STREET ADDRESS	114 HARRINGTON AVENUE	
1.4 CITY-ST-ZIP	WESTWOOD NJ	
2.1 TITLE	SR. VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	THOMAS, JACK	
2.3 STREET ADDRESS	405 GETZ AVENUE	
2.4 CITY-ST-ZIP	STATEN ISLAND, NY	
3.1 TITLE	VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	WILSON, ROBERT	
3.3 STREET ADDRESS	26 TWIN BROOK COURT	
3.4 CITY-ST-ZIP	RAMSEY, NJ	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Corp. VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	Leonard Kestecher.	
5.3 STREET ADDRESS	15 Dudley Court	
5.4 CITY-ST-ZIP	Wayne, NJ	
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
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: _____ 973-661-9000

CR2E034 (10/97)