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Apr 21 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 486209

(0)

1. Corporation Name

GUARD TECHNOLOGIES, INC.

Principal Place of Business

TWO ALHAMBRA PLZ., #110
P.O. BOX 143441
CORAL GABLES FL 33134

Mailing Address

P.O. BOX 7103
PRINCETON NJ 08543-7103
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

3. Date Incorporated or Qualified

10/03/1975

3a. Date of Last Report

04/29/1996

4. FEI Number

59-1641242

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

6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

NEVIN, DARIUS G.
GUARD TECHNOLOGIES, INC.
TWO ALHAMBRA PLAZA #110
CORAL GABLES FL 33134

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE CV
NAME MCQUIRE, ROBERT J.
STREET ADDRESS 900 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY

DELETE

TITLE PSD
NAME NEVIN, DARIUS G.
STREET ADDRESS TWO ALHAMBRA PLZ., #110
CITY-ST-ZIP CORAL GABLES FL

DELETE

TITLE D
NAME LANDIS, MARK
STREET ADDRESS TWO ALHAMBRA PLAZA #110
CITY-ST-ZIP CORAL GABLES FL

DELETE

TITLE D
NAME KROLL, JULES B.
STREET ADDRESS 900 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY

DELETE

TITLE D
NAME ROSETTI, JOSEPH R.
STREET ADDRESS 900 THIRD AVENUE
CITY-ST-ZIP NEW YORK NY

DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Change Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

Change Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Change Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

Change Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

Change Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

Change Addition

Perry Levine
Two Alhambra Plaza, Suite 110
Coral Gables, FL 33134

14. I do 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:

SIGNATURE

3/12/97 305-446-2041

CR2E034 (9/96)