2001 UNIFORM BUSINESS REPORT (UBR)

Apr 09, 2001 8:00 am Secretary of State **DOCUMENT # 486209** 1. Entity Name **GUARD TECHNOLOGIES, INC.** 04-09-2001 90053 013 ***150.00 Principal Place of Business Mailing Address 375 RARITAN CENTER PKWY 5775 BLUE LAGOON DR # 170 EDISON NJ 08837 MIAMI FL 33126 US , 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FE! Number 59-1641242 Not Applicable Country \$8.75 Additional 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 LANDIS, MARK Street Address (P.O. Box Number is Not Acceptable) 1601 SAWGRASS CORPORATE PKWY **STE 400** SUNRISE FL 33323 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 (NOTE: Registered Agent signature required when reinstating) 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, 2001 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. EVP CEO S ☐ Delete TITLE TITLE BJoseph Restivo LANDÍS, MARK NAME Sawgrass Corp. Phuy 1601 SAWGRASS CORPORATE PKWY #400 STREET ADDRESS STREET ADDRESS CITY-ST-7IP Suncise CITY-ST-ZIP SUNRISE FL 33323 ☐ Change ☐ Delete TITLE J. Murfree Butler NAME Kroll, Jules B. NAME 1601 Sawgress Corp. Phuy. #400 STREET ADDRESS STREET ADDRESS 900 THIRD AVENUE CITY-ST-ZIP CITY-ST-ZIP NEW YORK NY Sunrige, ☐ Delete Addition TITLE Richard Bard ROSETTI: JOSEPH R .- -NAME-NAME 1601 Cawgrass Cosp. Phwy. #400 STREET ADORESS 900 THIRD AVENUE STREET ADDRESS CITY-ST-ZIP **NEW YORK NY** CITY-ST-ZIP Addition D **D**elete TITI F Susan Mayer LEVINE. PERRY NAME Corp. Phwy #400 STREET ADDRESS 1601 Sawgrass STREET ADDRESS 1601 SAWGRASS CORP. PKWY # 400 CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33323 ∧coo- 6.′ ☐ Change Addition ☐ Delete TITLE TITLE WALIN, STEVEN NAME STREET ADDRESS 11. STREET ADDRESS 1601 SAWGRASS CORP. PKWY # 400 CITY-ST-ZIP CITY-ST-ZIP SUNRISE FL 33323 Delete CFO TITLE TITLE en Sharpe Kerry Winkler 1601 Sawgrass Corp. Phwy #400. NAME NAME * 1 2 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Smrize 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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