FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

PROFIT CORPORATION ANNUAL REPORT 1996

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

APPROVED AND FILED
1996 JUL 15 AM 10: 56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DOCUMENT # F01757

1. Corporation Name
American Body Armor & Equipment, Inc.

Principal Place of Business
191 Nassau Place Road
Yulee, Fl. 32097

Mailing Address
P. O. Drawer 1769
Fernandina Beach, Fl.
32035-1769

400001892324
-07/12/96--01050--016
****225.00 ****225.00

3. Date Incorporated or Qualified: 10/15/80
3a. Date of Last Report: 12/31/95
4. FEI Number: 59-2044869 — Applied For / Not Applicable
5. Certificate of Status Desired [X] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [X] Yes [ ] No

2. Principal Place of Business
21 191 Nassau Place Road
Suite, Apt #, etc.
22
City & State
23 Yulee, Fl.
Zip
24 32097
Country
25 Nassau

2a. Mailing Address
26 P. O. Drawer 1769
Suite, Apt. #, etc.
27
City & State
28 Fernandina Bch, Fl.
Zip
29 32035-1769
Country
30 Nassau

9. Name and Address of Current Registered Agent
George Ridge
Kent, Ridge & Crawford
225 Water Street
Jacksonville, Fl. 32202

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
400001892324
-07/12/96--01050--017
84 City
******8.75 FL ******8.75

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 ______ DATE ______

12. OFFICERS AND DIRECTORS

TITLE	Director, Chairman	[X] DELETE
NAME	Julius Lasnick	
STREET ADDRESS	P.O. Drawer 1769 N/A	
CITY-ST-ZIP	Fernandina Beach, FL 32035-1769	
TITLE	Vice President	[X] DELETE
NAME	William H. Johnson	
STREET ADDRESS	P.O. Drawer 1769 N/A	
CITY-ST-ZIP	Fernandina Beach, FL 32035-1769	
TITLE	Director	[X] DELETE
NAME	John Innes	
STREET ADDRESS	P.O. Drawer 1769 N/A	
CITY-ST-ZIP	Fernandina Beach, FL 32035-1769	
TITLE	Director	[X] DELETE
NAME	Gardner F. Davis	
STREET ADDRESS	P.O. Drawer 1769 N/A	
CITY-ST-ZIP	Fernandina Beach, FL 32035-1769	
TITLE	Senior Vice President	[X] DELETE
NAME	J. Michael Elliott	
STREET ADDRESS	P.O. Drawer 1769 N/A	
CITY-ST-ZIP	Fernandina Beach, FL 32035-1769	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1 1 TITLE	Vice President of Finance & Secretary	[ ] Change [X] Addition
1 2 NAME	Carol T. Burke	
1 3 STREET ADDRESS	P. O. Drawer 1769 N/A	
1 4 CITY-ST-ZIP	Fernandina Beach, Fl. 32035-1769	
2 1 TITLE	Vice President-Sales & Marketing	[ ] Change [X] Addition
2 2 NAME	Richard T. Bistrong N/A	
2 3 STREET ADDRESS	P. O. Drawer 1769	
2 4 CITY-ST-ZIP	Fernandina Beach, Fl. 32035-1769	
3 1 TITLE	Director, Chairman	[ ] Change [X] Addition
3 2 NAME	Warren B. Kanders	
3 3 STREET ADDRESS	P. O. Drawer 1769 N/A	
3 4 CITY-ST-ZIP	Fernandina Beach, Fl. 32035-1769	
4 1 TITLE	Director	[ ] Change [X] Addition
4 2 NAME	Burtt Ehrlich	
4 3 STREET ADDRESS	P. O. Drawer 1769 N/A	
4 4 CITY-ST-ZIP	Fernandina Beach, Fl. 32035-1769	
5 1 TITLE	Director	[ ] Change [X] Addition
5 2 NAME	Nicholas Sokolow	
5 3 STREET ADDRESS	P. O. Drawer 1769 N/A	
5 4 CITY-ST-ZIP	Fernandina Beach, Fl. 32035-1769	
6 1 TITLE	Vice President	[ ] Change [XX] Addition
6 2 NAME	J. Michael Elliott	
6 3 STREET ADDRESS	P.O. Drawer 1769 N/A	
6 4 CITY-ST-ZIP	Fernandina Beach, FL 32035-1769	

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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Carol J Burke, Carol T. Burke 7/12/96 (904)261-4035
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)

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ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

ADDITION

Title: Director
Name: Thomas Strauss
Address: P. O. Drawer 1769 N/A
Fernandina Bch.,Fl. 32035-1769

ADDITION

Title: Director
Name: Richard C. Bartlett
Address: P. O. Drawer 1769 N/A
Fernandina Bch., Fl. 32035-1769