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

PROFIT CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

F95000004312 (3) **DOCUMENT #**

POINT BLANK BODY ARMOR INC.

Principal Place of Business Mailing Address 4031 NE 12TH TERRACE 4031 NE 12TH TERRACE OAKLAND PARK FL 33334 OAKLAND PARK FL 33334 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 09/06/1995 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 74-2764044 26 Not Applicable 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution Added to Fees 23 28 Country Country Zio Zip 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. 24 30 Yes 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BROOKS, JEFFREY 4031 NE 12TH TERRACE Street Address (P.O. Box Number is Not Acceptable) OAKLAND PARK FL 33334 83 84 City Zip Code 85 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 (NOTE: Registered Agent signature required when reinstating) DATE Signature, typed or printed name of registered agent and title if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 12. 13. DELETE Change Addition 1.1 TITLE TITLE **BROOKS, DAVID** NAME 1.2 NAME 20 RED GROUND RD. 1.3 STREET ADDRESS STREET ADDRESS **OLD WESTBURY NY 11568** 1.4 CITY - ST - ZIP CITY-ST-ZIP Change Addition DELETE TITLE 2.1 TITLE KREIDELL, MARY 2.2 NAME NAME 4031 NE 12TH TERRACE STREET ADDRESS 2.3 STREET ADDRESS **OAKLAND PARK FL 33334** 2.4 CITY - ST - ZIP CITY-ST-ZIP ☐ Change Addition DELETE 3.1 TITLE TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change ☐ Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - ST - ZIP CITY-ST-ZIP DELETE 6.1 TITLE Change Addition TITLE 62 NAME NAME

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. 316/98

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

Mar 13 1998 8:00am

Secretary of State