

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # P94000032181 (7)

1. Corporation Name

PRO-GUARD SECURITY, INC.



Principal Place of Business

701 S. HOMESTEAD BLVD.  
SUITE#3  
MIAMI FL 33030  
US

Mailing Address

11921 SW 271 TER  
NARANJA FL 33023

3. Date Incorporated or Qualified  
04/25/1994

3a. Date of Last Report  
04/20/1995

2. Principal Place of Business

21 45 N.W. 8th St

2a. Mailing Address

26 45 N.W. 8th St

4. FEI Number

65-0484369

Applied For

Not Applicable

Suite, Apt. #, etc.

22 109

Suite, Apt. #, etc.

27 109

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

City & State

23 Homestead FL

City & State

28 Homestead FL

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

Zip

24 33030

Country

Zip

29 33030

Country

25

30

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SMITH, WALTER R II  
11921 SW 271 TER  
NARANJA FL 33023

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME D  
SMITH, WALTER R II  
STREET ADDRESS 11921 SW 271 TER  
CITY-ST-ZIP NARANJA FL 33023

TITLE ☐ DELETE

NAME D  
SMITH, MARIA I  
STREET ADDRESS 11921 SW 271 TER  
CITY-ST-ZIP NARANJA FL 33023

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Director  
Marinello, Vincent C.  
999-B Hamilton Dr.  
Homestead, FL 33034

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:

WALTER R. Smith II

5/3/96

(305) 2452611

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #

CR2E034 (12/95)