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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P95000001059 (1)

FILED Jun 01 1998 8:00am Secretary of State

	UGUARD, INC.	Maria Ad			
Principal Plac		Mailing Address			
1601 SW 125TH COURT 1601 SW 125TH COURT MIAM! FL 33175 MIAM! FL 33175					
US		US		DO NOT WRITE IN THIS	SPACE
				3. Date Incorporated or Qualified	
				01/04/1995	
	Place of Business 5w 125 (f.	2a. Mailing Address		4. FEI Number	Applied For
21 /60/ Suite, Apt.		26 <i>JAITE</i> Suite, Apt. #, etc.		65-0549261	Not Applicable
22	#, U IC.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	0	City & State		Election Campaign Financing	\$5.00 May Be
23 MIA	A	28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the cur	
24 33/7	75 25 USA	29	30		ZPYes ☐ No
	9. Name and Address of Curren	t Registered Agent		10. Name and Address of New Registered	Agent
AN	MATO, PAUL		81 Name	Paul Amsto	
1601 S.W. 125TH COURT			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
ME	AMI FL 33175		160	1 SW 126 ct.	
			[83]		ĺ
			84 City		85 Zip Code
			1771	<i>ami</i> FL	. <i> 33/7</i> 5
office or r agent. I a	to the provisions of Sections 607.050; registered agent, or both, in the State im familiar with, and according obliga-	2 and 607.1508. Florida Statut of Florida. Such change was itions of, Section 607.0505, Fl	les, the above-named corp authorized by the corporat orida Statutes.	oration submits this statement for the purpose o ion's board of directors. I hereby accept the app	changing its registered pintment as registered
SIGNATURE	Signature, typed or printed harte of registered age:	or and tulo if annic able (NO)	E: Registered Agent signature requir	ed when reinstation) ATE	0/7/
12.	OFFICERS AND		13,	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	AMATO, PAUL		1.2 NAME		
STREET ADDRESS	1601 S.W. 125TH COURT		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33175		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-SY-ZIP		_/
TITLE	}	☐ DELETE	4.1 TITLE		hange Addition
NAME	- -	*	4. 2 NAME	,	//k /
STREET ADDRESS			4.3 STREET ADDRESS	(JU 00 / 1
CITY-ST-ZIP			4.4 City-St-ZiP		W 1/
TITLE		DELETE	5.1 TITLE	/	Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		1
CITY-ST-ZIP		T 55	5.4 CITY - ST - ZIP		<u> </u>
TITLE		DELETE	6.1 TITLE	60000254344	Change Addition
NAME			62 NAME	-06/02/980101702	55
STREET ADDRESS			6.3 STREET ADDRESS	***150.00	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	ふふふも こうじょ じじ	

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.

SIGNATURE: