1. Entity Nam	MENT # P95000 GUARD, INC.		FILED Jan 09, 2001 8:00 am Secretary of State							
Principal Place				01-09-2001						
46 SOMERSET		Mailing Address 46 SOMERSET TERRACE SUITE 315 PALM BEACH GARDENS FI US	SUITE 315 PALM BEACH GARDENS FL 33418							
2. Principal Pl	lace of Business	3. Mailing Address								
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				DO NOT WRITE	IN THIS SPA	ACE		1
City & State	е	City & State	City & State			FEI Number 65-0588291			plied For t Applicable	
Zip	Country	Zip	Count	try	5.	Certificate of Status Desired		3.75 Add e Required		
	6. Name and Address of Currer	t Registered Agent			7. 1	Name and Address of New Reg		 -		-
				Name						
SAYRE, ROBERT 46 SOMERSET TERRACE				Street Address (P.O. Box Number is Not Acceptable)						
	MERSET TERRACE 1 BEACH GARDENS FL 33418		ŀ							
				City			FL	Zip Code		
	named entity submits this statement		<u> </u>		-1-4	- A - L- L				- :
9. This corpo	Signature, typed or printed name of registered age oration is eligible to satisfy its Intangib equirement and elects to do so. ia on back)	!!! FEE 001 Fee	Agent signature in 1S \$150.00 will be \$550 epartment of	.00 f State	10. Election Campaign Finar Trust Fund Contribution.		Ádded	0 May Be I to Fees		
11.	OFFICERS AN		12.		Α[DDITIONS/CHANGES TO OFFICE				6
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Krasney, Samuel J 14 Pepperwood Lane	Delete					Ļ] Change	Addition	E034 (10/00)
TITLE	PEPPER PIKE OH 44124 VPD		TITLE					Change	☐ Addition	CR2E
NAME STREET ADDRESS	FRIEDMAN, STEVEN 24 BERMUDA LAKE DRIVE			ET ADDRESS	_					
CITY-ST-ZIP -	PALM BEACH GARDENS FL 33	1418 Delete	TITLE	-\$T-ZiP		<u> </u>		Change	☐ Addition	▎▐▋
NAME STREET ADDRESS CITY-ST-ZIP	FRIEDMAN, IRVING Z 101 BANYAN ISLE DRIVE PALM BEACH GARDENS FL 33	•	NAME STREE		مستحدوثة بال	The second secon			* . .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		: 1	46 Si	ent et saure daers et terr . Beach Gardei	ALE] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete		l			C] Change	☐ Addition	
indicated of the corr	certify that the information supplied with on this report or supplemental report poration or the receiver or trustee emer or on an attachment with an address SIGNATUSE AND TYPED OF	is true and accurate and that powered to execute this report	my signat t as requir l.	ure shall have ed by Chapte	e the same er 607, Flor	legal effect as if made under 0at ida Statutes; and that my name a	n; that I am ippears in B 6I—L≃ 66	an officer lock 11 or	or director Block 12 if	】