

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

DOCUMENT # P95000078040 (9)

1. Corporation Name
PROTECTIVE RESOURCES INTERNATIONAL, INC.



Principal Place of Business

1300 OCEAN WAY, SUITE 311
JUPITER FL 33477

Mailing Address

1300 OCEAN WAY, SUITE 311
JUPITER FL 33477

2. Principal Place of Business

2a. Mailing Address

21 308 GOLFVIEW Rd.
Suite, Apt. #, etc.

22 405-W

23 No. Palm Beach, FL

24 33408

25 USA

26 308 GOLFVIEW Road
Suite, Apt. #, etc.

27 405-W

28 No. Palm Beach, FL

29 33408

30 USA

9. Name and Address of Current Registered Agent

SNOW, ELMER L III
1300 OCEAN WAY, SUITE 311
JUPITER FL 33477

3. Date Incorporated or Qualified
10/09/1995

3a. Date of Last Report
N/A

4. FEI Number

65-0620270

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

10. Name and Address of New Registered Agent

81 Name

SNOW III, ELMER L.

82 Street Address (P.O. Box Number is Not Acceptable)

308 GOLFVIEW Rd.

83

Apt 405-W

84 City

No. Palm Beach

FL

85 Zip Code
33408

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: ELMER L. SNOW III

(Signature, typed or printed name of registered agent and title, if applicable)

Charles L. Snow III

(NOTE: Registered Agent signature expires when term ends)

4-1-96

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME DONNA KRAMER

STREET ADDRESS 308 GOLFVIEW Rd. #405-W

CITY-ST-ZIP NO. PALM BEACH, FL. 33408

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

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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

DONNA KRAMER

1.3 STREET ADDRESS

308 GOLFVIEW Rd. #405-W

1.4 CITY-ST-ZIP

NO. PALM BEACH, FL. 33408

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

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: Charles L. Snow III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-1-96 407-691-0891

Date Daytime Phone

CR2E034 (12/95)