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

**CORPORATION ANNUAL REPORT** 1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000078040 (9)

PROTECTIVE RESOURCES INTERNATIONAL, INC.

## **FILED** Apr 29 1997 8:00am Secretary of State

Principal Place	e of Business	Mailing Address				1 100(103) 100 1010) 01111 00111 00111	<b>4 (</b> (17 1 <b>4 8 6</b> ) (1		(8 BB(1 1901
308 GOLFVIEW RD		308 GOLFVIEW ROAD							
NO. PALM BEACH FL 33408		405-W NO. PALM BEACH FL 33408-3522 US							
US						3. Date Incorporated or Qualified 3a. Date of Last Report			
						10/09/1995 04/12/1996			
	lace of Business	2a. Mailing Address				4. FEI Number Applied For			pplied For
21		26				65-0620270 Not Applicable			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional
22		City & State				<u> </u>			equired
City & State 23	Ð	$\vdash$				6. Election Campaign Financing			May Be to Fees
Zip	Country	Zip Country				Trust Fund Contribution			
24	<b>⊢</b> ′	25 29 30		,		<b>8.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9, Name and Address of Current		1001			10. Name and Address of New Re		-	
SNC	OW III, ELMER L.			81	Name				
	GOLFVIEW RD	82 Stree			Street Addre	ess (P.O. Box Number is Not Acceptab	le\		
	405-W		UZ Street A			to a sex Nomber is Not Accepted	,		[
	PALM BEACH FL 33408								
				84	City			<b>85</b> Zip	Code
					•		FL		
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 Pionida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent as authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent and the appointment as registered agent and the appointment as registered agent agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent. I am familiar purpose of changing its registered agent agent. I am familiar purpose of changing its registered agent agent. I am familiar purpose of changing its registered agent agent. I am familiar purpose of changing its registered agent agent. I am familiar purpose of changing its registered agent agent. I am familiar purpose of changing its registered agent agent. I am familiar purpose of changing its registered agent									
12.	OFFICERS AND	DELETE	13.		<del> </del>	ADDITIONS/CHANGES TO OFFICE		Change	Addition
TITLE NAME	DONNA KRAMER	order	1	1.1 THEE  1.2 NAME  1.3 STREET ADDRESS			,	Onlings	L Addition
STREET ADDRESS	308 GOLFVIEW RD. #405-W								
CITY-ST-ZIP	NO. PALM BEACH FL		1.4 CiTY-						į
TITLE		DELETE	. 2.1 TITLE				[	Change	Addition
NAME			2 2 NA	2.2 NAME					
STREET ADDRESS			2 3 ST	2 3 STREET ADDRESS					
CITY-ST-ZIP			2 4 CITY - S		61 - ZIP				
TITLE		☐ DELETE	DELETE 31 TIFL				, [	Change	Addition
NAME			3.2 NAME						
STREET ADDRESS			3.3 STREET ADDRESS						
CITY-ST-ZIP		T nevere	3.4. COLY-S1-ZIP  DELETE 4.1 TITLE		51 - ZIP		······	Change	Addition
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STREET ADDRESS					ADDRESS				
CITY-ST-ZIP									
TITLE		DELETE	4.4 City - 5.1 Title					Change	Addition
NAME		•	5.2 NA					-	
STREET ADDRESS			5.3 SI	REEL	ADDRESS				
CITY-ST-ZIP			5.4 Ci						
TITLE		☐ DELETE	61111		·		1	Change	Addition
NAME			62 NA	ME					
STREET ADDRESS			6351	REET	ADDRESS				
CITY-ST-ZIP			6400						
4.4 Lefo horol	but and the the information of our of	the state of the fitting of the property of the state of	ify for too			in Contion 110 07(2)(i) Florida Statuto	n I december	ومساور والأرامة	4 46 1

I do hereby certify that the information supplied with this filling 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.