

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION
 ANNUAL REPORT
 1996



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

DOCUMENT # **V10057 (0)**
 1. Corporation Name
PRESTIGE PROTECTIVE CORPORATION



Principal Place of Business: **7061 W. COMMERCIAL BLVD. SUITES 5A & 5B TAMARAC FL 33319 US**
 Mailing Address: **7071 WEST COMMERCIAL BLVD. SUITE 2-A TAMARAC FL 33319**

3. Date Incorporated or Qualified: **01/29/1992**
 3a. Date of Last Report: **07/21/1995**

2. Principal Place of Business
 21 **7071 W. Commercial Bl.**
 Suite, Apt # etc.
 22 **Suite 2A**
 City & State
 23 **Tamarac, FL**
 Zip Country
 24 **33319** 25 **USA**

2a. Mailing Address
 26 **7071 W. Commercial Blv.**
 Suite, Apt #, etc.
 27 **Suite 2A**
 City & State
 28 **Tamarac, FL**
 Zip Country
 29 **33319** 30 **USA**

4. FEI Number: **65-0359615**
 Applied For: Not Applicable
 5. Certificate of Status Desired: **\$8.75** Additional Fee Required
 6. Election Campaign Financing Trust Fund Contribution: **\$5.00** May Be Added to Fees
 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

WILKINSON & WILKINSON, ESQ.
515 N. FLAGLER DR., SUITE 300
W. PALM BEACH FL 33401

10. Name and Address of New Registered Agent

81 Name: **Kevin D. Wilkinson, Esq.**
 82 Street: **12794 West Forest Hill Blvd.**
 83 **Suite 28-B**
 84 City: **West Palm Beach FL** 85 Zip Code: **33414**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named person or persons is/are this agent 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: *Kevin D. Wilkinson Esquire* DATE: **7/17/96**

12. OFFICERS AND DIRECTORS

TITLE	PVPT <input type="checkbox"/> DELETE
NAME	GALLIONE, RICHARD K.
STREET ADDRESS	7061 W. COMMERCIAL BLVD., SUITES 5A & 5B
CITY-ST-ZIP	TAMARAC FL
TITLE	S <input checked="" type="checkbox"/> DELETE
NAME	GALLIONE, LORIDANA
STREET ADDRESS	7061 W. COMMERCIAL BLVD, SUITES 5A-5B
CITY-ST-ZIP	TAMARAC FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	President & Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Richard K. Gallione
13 STREET ADDRESS	7071 W. Commercial Blvd., Suite 2A
14 CITY-ST-ZIP	Tamarac, FL 33319
21 TITLE	Vice President & Sec'y <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	Kevin D. Wilkinson
23 STREET ADDRESS	12794 W. Forest Hill Blvd, Ste 28B
24 CITY-ST-ZIP	West Palm Beach, FL 33414
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY-ST-ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY-ST-ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY-ST-ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Kevin D. Wilkinson* Vice President DATE: **7/17/96** 5617537200

CR2E034 (3/96)