


PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

APPROVED
TAS FORM.
FILED

01 DEC 26 PM 4:13

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION REINSTATEMENT



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M63555

1. Corporation Name
PROPERTY SECURITY FLORIDA, INC.

| | | | |
|--|--|---|--|
| 2. Principal Office Address 201 S. Biscayne Boulevard Suite, Apt. #, etc. 10th Floor ² City & State Miami, Florida Zip 33131 | | 3. Mailing Office Address Same Suite, Apt. #, etc. City & State City & State Zip Country USA | |
|--|--|---|--|

REINSTATEMENT 1999-2001

4. Date Incorporated or Qualified To Do Business in Florida 12/11/87

5. FEI Number 65-0018708 Applied For Not Applicable

6. CERTIFICATE OF STATUS DESIRED \$8.75-Additional Fee required for a Certificate of Status

7. Name and Address of Current Registered Agent

Name
MANUEL A. GARCIA-LINARES

Street Address (P.O. Box Number is Not Acceptable)
Miami Center - 10th Floor

Suite, Apt. #, Etc.
201 S. Biscayne Boulevard

City
Miami

State
FL

Zip Code
33131

900004749059-5
-01/03/02--01042--025
****900.00 ****900.00

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of Registered Agent _____ Date 12/20/01

REGISTERED AGENT MUST SIGN

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

| Titles | Name of Officers and/or Directors | Street Address of Each Officer and/or Director | City / State / Zip |
|--------|-----------------------------------|--|--|
| D | Exley, Richard J. | Nations House 103 Wigmore Street | London, England WIH 9 |
| PD | East, Stephen J. | Nations House 103 Wigmore Street | London, England WIH 9 |
| S | Batchelor, Peter | 103 Wigmore Street | London, England WIS 9 WIS 9 WIU 1AH |
| | | | |
| | | | |

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S. that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.0713(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE: Peter Batchelor 18 DEC 2001

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #



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 Tallahassee, Florida 32301
 (850) 681-6528

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December 26, 2001

CORPORATION NAME (S) AND DOCUMENT NUMBER (S):

Property Security Florida, Inc.

Filing Evidence

- Plain/Confirmation Copy
- Certified Copy

Type of Document

- Certificate of Status
- Certificate of Good Standing
- Articles Only
- All Charter Documents to Include Articles & Amendments
- Fictitious Name Certificate
- Other

Retrieval Request

- Photocopy
- Certified Copy

| NEW FILINGS | |
|--------------------------|-------------------|
| <input type="checkbox"/> | Profit |
| <input type="checkbox"/> | Non Profit |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Domestication |
| <input type="checkbox"/> | Other |

| AMENDMENTS | |
|--------------------------|------------------------------------|
| <input type="checkbox"/> | Amendment |
| <input type="checkbox"/> | Resignation of RA Officer/Director |
| <input type="checkbox"/> | Change of Registered Agent |
| <input type="checkbox"/> | Dissolution/Withdrawal |
| <input type="checkbox"/> | Merger |

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| OTHER FILINGS | |
|-------------------------------------|------------------|
| <input type="checkbox"/> | Annual Reports |
| <input type="checkbox"/> | Fictitious Name |
| <input type="checkbox"/> | Name Reservation |
| <input checked="" type="checkbox"/> | Reinstatement |

| REGISTRATION/QUALIFICATION | |
|----------------------------|-------------------|
| <input type="checkbox"/> | Foreign |
| <input type="checkbox"/> | Limited Liability |
| <input type="checkbox"/> | Reinstatement |
| <input type="checkbox"/> | Trademark |
| <input type="checkbox"/> | Other |