FILED

Feb 20, 1999 8:00 am Secretary of State

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400030393

1. Corporation Name

R & M SECURITY SYSTEMS, INC.

2343 WEST 69 UNIT 1 HIALEAH FL 33	-	Mailing Address P.O. BOX 126660 HIALEAH FL 33012 US				DO NOT WRIT 3. Date Incorporated or Qualifed 04/20/1994 4. FEI Number		SPACE	Applied For
21		26				65-0483961			Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.			*****			03 0403901			Additional
22						5. Certifcate of Status Desired		*	Required:
City & Stat	te	City & State				6. Election Campaign Financing		\$5.00	May Be
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Count	try		8. This corporation owes the curre	ent year Int	angible	
24	25	29	30			Personal Property Tax.	•	Ŭ Yes	□No
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re	egistered	Agent	
GONZALEZ, RAUL JR 2343 WEST 69TH ST. UNIT 1 HIALEAH FL 33016			8	B2 5	Name Street Addre	ess (P.O. Box Number is Not Acceptat	ble)	85 Zip) Code
SIGNATURE	egistered agent, or both, in the State im familiar with, and accept the obligation Signature, typed or printed name of registered agei	of Florida. Such change was autations of, Section 607.0505, Floridant and title if applicable. (NOTE: F	ithorized b ida Statute	by the	e corporation	oration submits this statement for the p n's board of directors. I hereby accept when reinstating)	ourpose of t the appoir	changing it ntment as r	s registered egistered
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	ICERS AN		
TITLE	PD CONTACE PAUL ID	DELETE 1.1 TI		Ē				Change	☐ Addition
NAME	GONZALEZ, RAUL JR		1.2 NAME	E					
STREET ADDRESS	2343 W. 69TH ST. UNIT 1		1.3 STRE	ET AD	XORESS				
CITY-ST-ZIP	HIALEAH FL 33016		1.4 CITY-	- \$T- ZI	IP				
TITLE	STD	☐ DELETE	2.1 TITLE	<u>:</u>				Change	☐ Addition
NAME	GONZALEZ, MADELYS		2.2 NAME	Ε	}				
STREET ADDRESS	2343 W. 69TH ST. UNIT 1		2.3 STRE	ET AD	ORESS				
City-st-zip	HIALEAH FL 33016		2. 4 CITY-		JP	<u></u>		<u>, </u>	-
TITLE	VD	☐ DELETE	3.1 TITLE	i				Change	☐ Addition
NAME	GONZALEZ, RAUL SR		3.2 NAME	Ξ.					
STREET ADDRESS	2343 W. 69TH ST. UNIT 1		3.3 STREE	ET AD	ORESS			•	
CITY-ST-ZIP	HIALEAH FL 33016		3.4. CITY-		IP			<u></u>	
TITLE		☐ DELETE	4.1 TITLE					☐ Change	☐ Addition
NAME			4. 2 NAME	£					
STREET ADDRESS			4.3 STREE	ET ADO	DRESS	·		•	i
CITY-ST-ZIP			4.4 CITY-		Р			·.	
TITLE		☐ DELETE	5.1 TITLE		.			Change	Addition
NAME			5.2 NAME				•		
STREET ADDRESS			5.3 STREE		1 .	•			
CITY-ST-ZIP			5.4 CITY-5		Р				
TITLE		☐ DELETE	6.1 TITLE			·		☐ Change	☐ Addition
NAME			6.2 NAME						
STREET ADDRESS			6.3 STREE	ET ADD	ORESS !				

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY-ST-ZIP