SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT . CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600051878 (2)

Principal Place of Business	Mailing Address
2310 NW 55TH COURT	2310 NW S5TH COURT
SUITE 132	SUITE 132
FORT LAUDERDALE FL 33309	FORT LAUDERDALE FL 33309

FILED Sep 19 1997 8:00am Secretary of State

SERVO	WATCH, INC.							
Principal Plac	e of Business	Mailing Address				LA TREFA METTO DOTTO MUTTO I	LOUIS BRION DISON SCORE IDES SO	88 1 8 71 88 3
2310 NW 55TI	H COURT	2310 NW 55TH COURT						
SUITE 132 SUITE 132					1			
FORT LAUDER	RDALE FL 33309	FORT LAUDERDALE FL 3	3309				E IN THIS SPACE	
					3. Date Incom	orated or Qualified	3a. Date of Last i	Report
					06/18/1	996		
	lace of Business	2a. Mailing Address			4. FEI Numbe		A	pplied For
21	_	26			65-0	677276	N	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.				# Codificate	of Status Desired	\$8.75	Additional	
22 27				8. Certificate	DI Status Desired	Fee R	equired	
City & State City & State				6. Election Ca	mpalgn Financing	\$5.00	May Be	
23 28					Trust Fund	Contribution		to Fees
Ziρ	Country	Zip	Countr	у	8. This corpor	alion owes or has p	aid the current year In	itangible
24	25	29	30		2.0	operty Tax due Jun		ŬÑo
	9. Name and Address of Curren	t Registered Agent			10. Name and	Address of New R	egistered Agent	
LOI	REDO, JOSE A ESQUIRE		81	Name				
	S.E. SECOND STREET		82	Cirani	Address (D.O. Bay No	wher is that Assent	-hial	
	TE 4000		02	Siree	Address (P.O. Box Nui	liber is Not Accepte	adie)	ľ
	MI FL 33131		83	 				
******	MM 1 2 00101							
			84	City			FL 85 Zip	Code
dd Dyrayant	to the provisions of Sections 607.050	2 and CO7 1508 Florida Ctalud	on the above	L	corporation submits th	is statement for the		ita namiologost
office or r	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	es, the abov authorized b	y the cor	corporation submits to coration's board of dire	ctors. I hereby acc	ept the appointment as	s registered
agent la	m familiar with, and accept the obliga	ations of, Section 607.0505, Fi	orida Statute	s.			,	,
SIGNATURE								
	Signature, typed or printed name of registered age			ent signature	required when reinstating)	OUANIOED TO OFF	DATE	00 11/40
12.	OFFICERS AND	DELETE	13.		·	CHANGES TO OFF	ICERS AND DIRECTO	K Addition
TITLE	_	וו ענגנונ	1.1 TITLE		THOMAS E.	COOMEC	☐ Change	ACIONION LA
NAME	SMITH, STEPHEN B	TO THE PAY HALLOS	1.2 NAME				m 100	
STREET ADDRESS	SERVOWATSCH SYSTEMS LT		1.3 STREE	ADDRESS	9055 WILES			
CITY-ST-ZIP	CHELMSFORD, ESSEX CM321		1.4 CITY-	ST-ZIP	CORAL SPR	NGS, FL	33067	
TITLE		☐ DELETÉ	2.1 TITLE				☐ Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	ADDRESS				Į
CITY-ST-ZIP			2.4 CITY-	ST - ZIP				
TITLE		DELETE	3.1 TITLE				Change	Addition
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STREET ADDRESS			3.3 STRFE	T ADDRESS				ł
CITY-ST-ZIP			3.4. CITY-					
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NAME								- 1
STREET ADDRESS		_ viiii	5.2 NAME					
				I ADDRESS				
CITY-ST-ZIP								
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			5.3 STREE 5.4 City-S				☐ Change	Addition
TITLE			5.3 STREE 5.4 City-5 6.1 Title 6.2 NAME				☐ Change	Addition

14. I do hereby certify that the information supposed 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 is supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, 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 an attachment with an address.