2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 24, 2008 08:00 A
Secretary of State

DOCUMENT # V38968

1. Entity Name
SECUR-ENTRY INDUSTRIES INC.

Principal Place of Business	Mailing Address
9175 165TH PL NORTH JUPITER, FL 33478 US	9175 165TH PL NORTH JUPITER, FL 33478 US

02142008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
NOT APPLICABLE ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

CAPUTO, GINO
9175 165TH PL NORTH
JUPITER, FL 33478

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW!!! FEE IS $150.00
After May 1, 2008 Fee will be $550.00

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	PTD
NAME	CAPUTO, GINO
STREET ADDRESS	9175 165TH PL NORTH
CITY-ST-ZIP	JUPITER, FL 33478
TITLE	VSD
NAME	CAPUTO, ROSALBA
STREET ADDRESS	9175 165TH PL NORTH
CITY-ST-ZIP	JUPITER, FL 33478
TITLE	V
NAME	CAPUTO, MICHAEL
STREET ADDRESS	9175 165TH PL NORTH
CITY-ST-ZIP	JUPITER, FL 33478
TITLE	V
NAME	THOMAS, CONNIE
STREET ADDRESS	9175 165TH PL NORTH
CITY-ST-ZIP	JUPITER, FL 33478
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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04/09/08-80041-019 158.75

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: _____ 561-748-9328
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #