

Oct 09 01 05:15p

Scuttillo Blake McMillan & 954-722-6692

p.3

2001 UNIFORM BUSINESS REPORT (UBR)**DOCUMENT # S43274**1. Entity Name
ALL FLORIDA ALARM SYSTEMS, INC.

Principal Place of Business

**POB 2571
BOCA RATON FL 33427**

Mailing Address

**P.O. BOX 2571
BOCA RATON FL 33427
US**

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

65-0254288

Applied For

Not Applicable

5. Certificate of Status Desired

☐**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**SCUTILLO & BLAKE C.P.A. P.A.
8000 N. UNIVERSITY DR.
TAMARAC FL 33321**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when (re)issuing)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐**FILE NOW!!! FEE IS \$550.00
After September 12, 2001 Fee will be \$750.00
Make Check Payable to Department of State**10. Election Campaign Financing
Trust Fund Contribution. ☐**\$5.00 May Be
Added to Fees**

11. OFFICERS AND DIRECTORS

TITLE	<input type="checkbox"/> Delete
NAME	PLUMMER, SIMON N.
STREET ADDRESS	8572 SHAWNE DAY
CITY-STATE-ZIP	BOCA RATON FL

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Delete
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CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Delete
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	800004745538--3
STREET ADDRESS	-12/31/01--01083--009
CITY-STATE-ZIP	***150.00 ***150.00

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-STATE-ZIP	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(b), 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 907, Florida Statutes; and that my name appears in Block 11 or Block 12 changed, or on an attachment with an address with all other changes.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TAXPAYERS COPY



Protecting People and Property With Peace of Mind

October 10, 2001

Ms. Katherine Harris
Secretary of State
Division of Corporations
PO Box 6327
Tallahassee, Florida 32314

Re: All Florida Alarm Systems, Inc.
Document # S43274

Dear Ms. Harris:

We recently received a notice that our Uniform Business Report was not filed for the current year. We mailed the report and the check in March, 2001. A copy of the report is enclosed. When we reconciled our bank account, we noticed the payment check had been outstanding for awhile. Until we received your notice, we were unaware of any problem.

We have always filed and paid our annual report on a timely basis. We respectfully request you reconsider the circumstances. Please accept the enclosed check for \$150.00 to replace the one sent in March along with a copy of the annual report as satisfaction in full and reinstate the corporation. We thank you in advance for your attention to this matter. If you have any questions about the contents of this letter, please contact us.

Sincerely,

All Florida Alarm Systems, Inc.

Simon N. Plummer

Encl.

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