

**2023 FOREIGN PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F18000001871

**Entity Name:** NEXUS ALARM AND SUPPRESSION, INC.

**Current Principal Place of Business:**

1100 OLD HIGHWAY 8 NW  
NEW BRIGHTON, MN 55112

**Current Mailing Address:**

1100 OLD HIGHWAY 8 NW  
NEW BRIGHTON, MN 55112 US

**FEI Number:** 83-0288278

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

C T CORPORATION SYSTEM  
1200 SOUTH PINE ISLAND ROAD  
PLANTATION, FL 33324 US

*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:** \_\_\_\_\_

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name BECKER, RUSSELL A.  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title ASST. TREASURER  
Name HLAVACH, STEPHEN  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title PRESIDENT  
Name BISHOP, JON  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title DIRECTOR  
Name PEREZ, CARLOS ENRIQUE  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title TREASURER  
Name BETTMANN, KRISTEN  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

Title SECRETARY, DIRECTOR  
Name LAMBERT, LOUIS  
Address 1100 OLD HIGHWAY 8 NW  
City-State-Zip: NEW BRIGHTON MN 55112

*I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.*

**SIGNATURE:** LAMBERT, LOUIS

**SECRETARY**

**03/15/2023**

Electronic Signature of Signing Officer/Director Detail

Date