

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
Jul 07, 1999 8:00 am
Secretary of State
07-07-1999 90004 025 ***158.75

PROFIT CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 589950
1. Corporation Name
TARGET INVESTIGATION & SECURITY, INC.

Principal Place of Business
**399 GROVE ISLE CIRCLE
VERO BEACH FL 32962**

Mailing Address
**399 GROVE ISLE CIRCLE
VERO BEACH FL 32962**



2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip
Country

2a. Mailing Address
Suite, Apt. #, etc.
City & State
Zip
Country

9. Name and Address of Current Registered Agent
**DOMONKOS, JOHN
399 GROVE ISLE CIRCLE
VERO BEACH FL 32962**

3. Date Incorporated or Qualified
10/27/1978

4. FEI Number
59-1892621

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

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

8. This corporation owes the current year Intangible Personal Property. ☐ Yes ☒ No

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

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

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOMONKOS, JOHN	1.2 NAME	
STREET ADDRESS	399 GROVE ISLE CIR	1.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	1.4 CITY-ST-ZIP	
TITLE	ST <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOMONKOS, ELIZABETH	2.2 NAME	
STREET ADDRESS	399 GROVE ISLE CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SAMBORA, ROBERT A	3.2 NAME	
STREET ADDRESS	399 GROVE ISLE CIR	3.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BCH FL	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE: *John Domonkos* **JOHN DOMONKOS** June 27/99 561-778-5110
Signature, typed or printed name of signing officer or director Date Daytime Phone #

CR2E034 (5/99)

584950
582204-90004-25



TARGET INVESTIGATION & SECURITY INC.

399 GROVE ISLE CIRCLE VERO BEACH, FL 32962 PHONE: (407) 778-5110

COMPLETE INVESTIGATION & SECURITY SERVICES

June 27, 1999

Florida Department of State
Division of Corporations
Annual Reports Filings
P O Box 1500
Tallahassee Fla
32302-1500

Attention: Ms. Trevor Brumbley
Regarding: Annual Report delay in filing

Dear Ms. Brumbley:

Further to my telephone conversations with you on several occasions, enclosed please find our check in the amount of \$150.00 for the Annual Filings fee as I have received the notice in today's mail. *158.75*

I had cancer operation and required a monthly chemotherapy treatments, due to medical coverage I had travel north for these treatments and I had the mail forwarded to me but, certain government mail is not forwarded by the post office. Even though I cancel forwarding for three week in every month but, your notice may have arrived at the wrong time and returned to you. I apologized for these delays it caused for you and to us.

Trusting the enclosed will reach you in good order, I remain,

Yours truly,
TARGET INVESTIGATION & SECURITY INC.,

[Signature]
John Domonkos
President

JD/ed
Encls.