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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name

599145

(0)

WACKENHUT INTERNATIONAL, INCORPORATED

Principal Place of Business

Mailing Address

SIGNATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

1500 SAN REMO AVE

1500 SAN REMO AVE



CORAL GABLES FL 33146-3009 CORAL GABLES FL 33146-3009						
					3. Date Incorporated or Qualified 01/05/1979	3a. Date of Last Report 05/01/1995
2. Principal Plac	ce of Business	2a. Mailino Address	- 1 le valla	~ \A#	4. FEI Number	Applied For
			cyenm	TDAK	59-1928071	Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	0	01): & State		. 🚗	6. Election Campaign Financing	\$5,00 May Be
23 HLM	BEACH GARDENS PL	8 HALM BSACH	GHED	ens pc	Trust Fund Contribution	Added to Fees
^{Zip} 33 4	Country CALL	。	Country	BEACH	This corporation has liability for i Florida Statutes	
24	9, Name and Address of Current Re	gistered Agent	190114111	, , , , , , , , , , , , , , , , , , , ,	10. Name and Address of New R	
		E	81	Name	ROWAN JAME	C
ROWAN, JAMES P. 82 Street Addre						
1500 SAN REMO AVENUE CORAL GABLES FL 33146				Street Address (P.O. Box Number is Not Acceptable) WACKENHUT DRIVE #100		
			84	·/2	OCANLA GADNEAK	B5 Zo Code
11 Discounced to	the provisions of Sections 607.0502 and	607 1609 Elorida Statuta	e the above	produceroral	ion cultimite the elatoment for the pur	rose of changing its registered office.
or registere	id agent, or both, in the State of Florida. S	iuch change was authorize	s, the above- ed by the corp	nameo corporat oration's board	of directors. I hereby accept the app	bintment as registered agent. I am
	n, and accept the obligations of, Section 6	eu7.0505, Florida Statutes				
SIGNATURE _	Signature, typed or printed name of registered agent and t	the if a iphicable. (NO)	E. Fagistered Age	nt signature required v	wher reinstaling)	DATE
12.	OFFICERS AND DI		13.		ADDITIONS/CHANGES TO OFF	
TITLE	C	☐ DELETE	1. 1 TITLE			Change Addition
NAME	WACKENHUT, GEORGE R.		1.2 NAME			
STREET ADDRESS	20 CASUARINA CONCOURSE		1.3 STREET			
CITY-ST-ZIP	CORAL GABLES FL	☐ DELETE	1.4 CITY - S	ST - ZIP		Change Addition
TITLE NAME	D Wackenhut, Richard R.		2 1 TITLE 2 2 NAME	مرين	CUENHUT RIGHT	PRA EXONAIGE LINES
STREET ADDRESS	10200 OLD CUTLER ROAD		2 3 STREET	T ADDDESS	35 South River	E KOND
CITY-ST-ZIP	MIAMI FL		2 4 City - S	1 .	STUARET FL 34	1996
TITLE	PD	DELETE.	3 1 TITLE			Change Addition
NAME	CARRIZOSA, FERNANDO		3.2 NAME			
STREET ADDRESS	10425 S.W. 114TH COURT		33 STREE	T ADDRESS		
CITY-ST-7IP	MIAMI FL		3.4 CITY- 9	ST-ZIP		
TITLE	1	DELETE	4 1 TITLE			Change Addition
NAME	DECOOK, RICHARD		4.2 NAME			
STREET ADDRESS	7391 FAIRWAY DRIVE #248			ADDRESS		
CITY-ST-ZIP	MIAMI LAKES FL VP	DETELL	4.4 CITY - 5 5 1 TITLE	ST-ZIP		Change M Addition
TITLE	BROWNELL, PAUL	Street.	5.2 NAME		A A GOEEN .	
NAME STREET ADDRESS	620 N.W. 92ND AVENUE			I ADDRESS 72	764 N.W. 15th St	•
CITY-ST-ZIP	PEMBROKE PINES FL		5.4 CHY-	1.7	UNRUSE FL 33	<i>3</i> 2 3
TITLE		[] DELFIL	6 1 TATLE			Change Addition
NAME	·		6.2 NAME			
STREET ADDRESS			63 STREE	T ADDRESS		
CITY-ST-ZIP			6.4 CITY-			
14. I do hereby	y certify that the information supplied with	this fling is voluntarily furn	ished and doe	es not qualify for ue and accurate	r the exemption stated in Section 119 and that my signature shall have the	.07(3)(k), Florida Statutes. I further same legal effect as if made under
oath; that I	y certify that the information supplied with the information indicated on this annual r I am an officer or director of the corporation Block 12 or Block 13 if changing of the	I or the receiver or truster	empowered	to execute this	report as required by Chapter 607, FI	orida Statutes; and that my name
appears in	BIOCK 12 OF BIOCK 13 IS CHARGED OF DA	i adaciji nent with ab ador	C-00		1 /21	an Internal
SIGNAT	URE:)			3/11/16	40/69/6840
	SIGNATURE AND TYPED OR PRI	NIED NAME OF SIGNING OFFICE	R OF DIRECTOR		Date	Daytime Phone #