

**2007 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 08, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # 696788**

1. Entity Name  
**F. & R. FIRE PROTECTION SYSTEMS, INC.**



Principal Place of Business

**3359 N.W. 154 TERR.  
MIAMI, FL 33054**

Mailing Address

**3359 N.W. 154 TERR.  
MIAMI, FL 33054**

**DO NOT WRITE IN THIS SPACE**



01032007 No Chg-P CR2E034 (11/05)

4. FEI Number  
**59-2471114**

Applied For  
Not Applicable

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

6. Name and Address of Current Registered Agent

**PIERSON, FRANK  
3359 NW 154TH TERR  
MIAMI, FL 33054**

**DO NOT WRITE  
IN THIS SPACE**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2007 Fee will be \$550.00**

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PIERSON, RONALD 3359 NW 154TH TERR MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PIERSON, FRANK 3359 NW 154TH TERR MIAMI, FL 33054
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST PIERSON, BRENDA 3359 NW 154TH TERR MIAMI, FL 33054
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U00000578195  
01/09/07-80018-025 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:**

*Brenda Pierson*

**Brenda Pierson**

**1/3/07 305-681-9583**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #