2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Mar 29, 2004 8:00 am Secretary of State

| DOCUMENT # 848610 1. Entity Name MURRAY'S PERSONAL PROTECTION SHRIEK ALARM, INCORPORATED | | | | | | 03-29-2004 90021 033 ***150.00 | | | | |
|---|--|-------------------------|--------------------------------------|-------------------------------|--|--------------------------------|--|--------------|-------------------|-----------------------------|
| Drive size al Dise | a of Cusiness | Adoiling A | | | | | | EAN | 00440 | |
| Principal Place of Business 2901 BONITA DR 2901 BONITA DR MOBILE, AL 36606 MOBILE, AL 36606 | | | | | | | | J4U | 23118 | |
| Principal Place of Business 3. Mailing Address | | | | | | | | | | |
| Suite, Apt. #, etc. | | Suite, A | Suite, Apt. #, etc. | | | 02172004 | Chg-P | CR2E | 034 (10/03) | |
| City & Stat | e | City & S | City & State | | | 4. FFI Number | 63- | 0753 | 331 AF | oplied For ot Applicable |
| Zip | Zip Country | | Zip Co. | | | 5. Certificate of | Status Desired | | \$8.75 Add | |
| 6. Name and Address of Current Registered Agent | | | | | | 7. Name and | ddress of New | Registered | Agent | |
| NIXON, TARY L. 224 E. INTENDENCIA STREET PENSACOLA, FL 32501 | | | | Name Street A | Street Address (P.O. Box Number is Not Acceptable) | | | | | |
| | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | City | | | | FI | Zip Cod | e |
| O The share | named entity submits this statemen | | .4 .4 | | | and a manufacture land | in the Charact F | | - | |
| | inamed entity submits this statement tions of registered agent. | ror the purpose | or changing its r | egisterea office a | or register | ed agent, or both | , in the State of F | ioriga. Tari | i iamiliar witri, | ано ассерс |
| SIGNATURE. | Signature, typed or printed name of registered ag | eet and 10e dispolicabi | e (NOTE | Registered Agent signa | ture (equifed | Letter reinstation) | | DATE | | |
| FIL After M | E NOW!!! FEE IS \$150.00 ay 1, 2004 Fee will be \$55 | 9. 8 | Election Campaig rust Fund Contri | gn Financing | | .00 May Be | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | | |
| 10. | OFFICERS AN | ID DIRECTORS | | 11. | | ADDITIONS/(| HANGES TO OF | FICERS AN | D DIRECTOR: | S IN 11 |
| TITLE | PTD | ib biricorona | ☐ Delete | TITLE | 1 | 7007101070 | TARGEO TO OF | , IOENS AIT | Change | Addition |
| NAME | GOLOMB, MURRAY | | | NAME | | | | | | |
| STREET ADDRESS CITY-ST-ZIP | 2901 BONITA DR. MOBILE, AL | | | STREET ADDRESS CITY-ST-ZIP | | | | | | |
| TITLE | VD VD | | ☐ Delete | TITLE | | | | , | ☐ Change | Addition |
| NAME | GOLOMB, TODD W. | | | NAME | | | | | | - |
| STREET ADDRESS | 2901 BONITA DR. | | | STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | MOBILE, AL | | | CITY-ST-ZIP TITLE | ļ | | | _ | Chann | [] Addition |
| TITLE NAME | GOLOMB, NORMA | | Defele | NAME | | | | | ☐ Change | Addition |
| STREET ADDRESS | 2901 BONITA DR. | | | STREET ADDRESS | | | | | | |
| CITY-ST-ZIP | MOBILE, AL | | | CITY-ST-ZIP | | | | | | ·- <u>-</u> |
| TITLE NAME | 1 | | Delete | TITLE NAME | | | | | ☐ Change | Addition |
| STREET ADDRESS | | | | STREET ADDRESS | | • | | | | |
| CITY-SI-ZIP | | | | CITY-ST-ZIP | | | | | | |
| TITLE | | - | ☐ Delete | TITLE | | | | | ☐ Change | Addition |
| NAME STREET ADDRESS | | | | NAME STREET ADDRESS | | | | | | |
| CITY-ST-2IP | | | | CITY-ST-ZIP | | | | | | |
| TITLE | | | ☐ Delete | TITLE | | | | | Change | Addition |

12. 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 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.

NAME

STREET ADDRESS

CITY-ST-ZiP

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

MUTTA Y

Golumb President 3/24/

¥ (251/479-4687 Dayling Phone #