2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # F17504

1. Entity Name

FLORIDA HOME SECURITY & IRONWORKS, INC.



FILED Apr 04, 2003 8:00 am Secretary of State

04-04-2003 90113 017 ***150.00

Principal Place 14025 N W 19 MIAMI FL 3305 US	TH AVE	14025	Mailing Address 14025 N W 19TH AVE MIAMI FL 33054 US									
2. Principal Place of Business		3. Maili	3. Mailing Address]		1 01016 01011	#{#t; #1#;i {##!		
Suite, Apt.	#, etc.	Suite	Suite, Apt. #, etc.				CHECK HERE IF MAKING CHANGES					
City & State		City	City & State			4. F	4. FEI Number 59-2064609			Applied For Not Applicable		
Zip	Country Zip			Country		5. C				.75 Additional Required		
6. Name and Address of Current Registered Agent						7. Name and Address of New Registered Agent -						
				:	Name						İ	
CIRAVOLO, RICK. G.			Street Address			dress (P.O. Bo	(P.O. Box Number is Not Acceptable)					
2930 NE 2ND COURT							V				4	
MIAMI FL 33137												
					City			FL	Zip Co	de		
	named entity submits this st ions of registered agent.	tatement for the purpo	ose of changing its r	registere	ed office or re	egistered age	nt, or both, in the State of Fl	orida. I am fa	miliar with	, and accept		
SIGNATURE .	Signature, typed or printed name of re-	gistered agent and title if appli	icable. (NOTE:	: Registered	d Agent signature	required when rein	nstating)	DATE			}	
Áfter	ILE NOW!!! FEE IS \$19 May 1, 2003 Fee will be Payable to Florida Depa	\$550.00					Election Campaign Fi Trust Fund Contribution			00 May Be ed to Fees		
10.5	الله OFFIC	CERS AND DIRECTOR	RS.	11.		ADE	DITIONS/CHANGES TO OF	FICERS AND	DIRECTO	RS IN 11]_	
	PD :		☐ Delete						☐ Change	☐ Addition	(10/02)	
NAME STREAM BOOKS CHIP ST ZIP	PAZIENZA, ANTHONY 14025 N W 19TH AVE MIAMI FL 33054 :			NAME STREI CITY							E034 (10	
TITLÉ	· · · · · · · · · · · · · · · · · · ·		☐ Delete	TITLE					☐ Change	☐ Addition	18	
NAME	ROY, BRENNON T		NAMI									
STREET ADDRESS CITY-ST-ZIP	14025 N W 19TH AVE MAIMI FL 33054			ET ADDRESS ST-ZIP								
TITLE	STD		☐ Delete	☐ Delete TITLE					☐ Change	☐ Addition	1	
NAME	BAUDOT, C.W.		_ Build	NAM	i				_ ,	_		
STREET ADDRESS	30 NE 96 ST				ET ADDRESS							
CITY-ST-ZIP	MIAMI.FL.	-	· · · · · · · · · · · · · · · · · · ·	CITY	ST-ZIP			· · · · · · · · · · · · · · · · · · ·			1	
TITLE	AST		☐ Delete	TITLE	l.			_	Change	Addition		
NAME STREET ADDRESS	CARTER, STEVEN. M. 12841 SW 70 AVE			NAM: STRE	ET ADDRESS						ŀ	
CITY-ST-ZIP	MIAMI FL				ST-ZIP							
TITLE			☐ Delete	TITLE					☐ Change	Addition	1	
NAME				NAM	:							
STREET ADDRESS				ET ADDRESS								
CITY-ST-ZIP				_	-ST-ZIP						4	
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NAME STREET ADDRESS	a a			NAMI	ET ADORESS	1 10 mg			1			
CITY-ST-ZIP		SCATTLE AND	机的各种化。網	\$**	ST-ZIP		with a street that the control of th		美国工	和。等學。	3.	
	i certify that the information su	innlied with this filing	does not qualify for	the exe	notion stated	d in Section 1	19.07(3)(i). Florida Statutes	I further certi	fy that the	information	1	

a. Thereby dering that the information supplied with this triing does not quality for the exemption stated in Section 119.07(3)(j), 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 of steer empowered to execute this report as required by Chapter-607; Florida Statutes; and that my name appears in Block 10 or Block 11 in the changed, or on an attachment with a potaress with all other like empowered.

SIGNATURE: 2

SIGNATURE AND TWPETO OR PRINTED MARKE OF SIGNING OFFICER OR DIRECTOR

PAZIENZA

Date Daytime Phone #