FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1995

FLORIDA DEPARTMENT OF STATE

APPROVED AND FILED

95 MAY 10 AM 10: 35

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **F88950** **(3)**

1. Corporate Name

AAA ALERT, INC.

Principal Place of Business	Mailing Address
% L.T. TUMBELTY 4844 PHYLLIS STREET JACKSONVILLE FL 32205	% L.T. TUMBELTY 4844 PHYLLIS STREET JACKSONVILLE FL 32205

DO NOT WRITE IN THIS SPACE

3. Date incorporated or qualified: 06/30/1982	3a. Date of Last Report: 10/04/1994
4. FEI Number: 59-2330752	Applied For / Not Applicable
5. Certificate of Status Desired	$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	$5.00 May Be Added to Fees

2. Principal Place of Business	2a. Mailing Address
21	26
22	27
23	28
24 Zip / 25 County	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

TUMBELTY, L.T.
4844 PHYLLIS STREET
JACKSONVILLE FL 32205

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Section 607.0502 and 617.0502, 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

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	TUMBELTY, L.T.
STREET ADDRESS	4844 PHYLLIS STREET
CITY-ST-ZIP	JACKSONVILLE FL
TITLE	~~S~~
NAME	~~TUMBELTY, SHIRLEY~~
STREET ADDRESS	~~4844 PHYLLIS STREET~~
CITY-ST-ZIP	~~JACKSONVILLE, FL 00000~~

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP — Change / Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(1)(e), Florida Statutes. I further certify that the information indicated on the 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 the 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 address.

SIGNATURE: L.T. Tumbelty — SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-5-95 — Date

904-388-5475 — Daytime Phone #

0020704 CP

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DOCUMENT # **F89750** **(6)**

SPORTFISHING ENTERPRISE OF MIAMI, INC.

~~575 CRANDON BLVD. #710~~
~~KEY BISCAYNE FL 33149~~

3. 06/29/1982 3a. 06/01/1994

21 4000 CRANDON BLVD 26 14225 SW 87 AVE

4. 65-0079811 Apparent / Not Apparent

22 27

5. $8.75 Additional Fee Required

23 KEY BISCAYNE FL 28 MIAMI, FL

6. $5.00 May Be Added to Fees

24 33149 25 DADE 29 33176 30 DADE

8. [X]

9. Name and Address of Current Registered Agent

~~SLAGA, PHILIP B.~~
~~575 CRANDON BLVD., APT. 710~~
~~KEY BISCAYNE FL 33149~~

10. Name and Address of New Registered Agent

81 Name: SLAGA PHILIP B

82 Street Address: 14225 SW 87 AVE

83 MIAMI FL.

84 FL 85 33176

11.

12.

P
SLAGA, PHILIP B.
~~575 CRANDON BLVD. #710~~
KEY BISCAYNE FL
S
~~SLAGA, TRUDY D.~~
~~575 CRANDON BLVD. #710~~
~~KEY BISCAYNE FL~~

13.

P
SLAGA PHILIP B
14225 SW 87 AVE
MIAMI FL 33176
SECRETARY
SLAGA TEDDY D
575 CRANDON BLVD #710
KEY BISCAYNE FL.

14.

SIGNATURE: PRESIDENT 5-8-95 305 361-8110

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0162433 CP