## Sep 07, 1999 8:00 am Secretary of State 09-07-1999 90001 025 \*\*\*550.00

## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

OCUMENT #	F93000003596
Composition Name	

Corporation Name

SHERMA	an Security Services, I	NC.								
incipal Place	e of Business	Mailing Addre	ss				 	Eiffe fires etti	in intid mili tant	
2 STILLMEADOW DRIVE 602 STILLMEADOW DRIVE RICHARDSON TX 75081-5614							DO NOT WRITE IN THIS SPACE			
					_		3. Date Incorporated or Qualifed 08/09/1993			
Principal Place of Business 2a. Mailing Address 26						4. FEI Number	$\longrightarrow$	pplied For		
							75-2477444		lot Applicable	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27							5. Certificate of Status Desired Sa.75 Additional Fee Required			
City & State City & State				_		6. Election Campaign Financing Trust Fund Contribution Added to Fees				
Zip Country Zip				Country			8. This corporation owes the current year Intangible			
	25	29 30					Personal Property Tax.	Yes	□No_	
	9. Name and Address of Curre	nt Registered Agen	t		10. Name and Address of New Registered Agent					
				8	1 Nam	e				
MORSE, CAROL A 6010 LE LAC ROAD				8	2 Stree	Street Address (P.O. Box Number is Not Acceptable)				
BOCA RATON FL 33496			8	3						
				8			r in fi		Code	
office or r	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such cha	ange was auth	norized b	v the cor	d corpor poration	ation submits this statement for the purpose of 's board of directors. I hereby accept the appoir	changing it itment as r	s registered registered	
SNATURE		<u>-</u>		,			when reinstating) DATE			
	Signature, typed or printed name of registered age		(NOTE: RE	13.	jeni signatur	e required v	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12	
·	PSCD:	OFFICERS AND DIRECTORS				1		Change		
_	SHERMAN, ROBERT N			1.2 NAME		ļ.			_	
1E	602 STILLMEADOW DRIVE				- ET ADDRES					
EET ADDRESS	RICHARDSON TX 75081-7514	OTICE!!!!!			ST-ZIP	٦				
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TE I	410			22 NAME					į	
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/-ST-Z)P	NICHARDSON 1X /3001-/314		DELETE	3.1 TITLE		<del></del>	<del></del>	Change	☐ Addition	

EET ADDRESS 6.4 CITY-ST-ZIP 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 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 reserver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attacking ment with an address, with all other like empowered.

3.1 TITLE

32 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE 5.2 NAME

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

3.3 STREET ADDRESS

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