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

**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9500003050 (0)

## AMERICAN COMMERCIAL SECURITY SERVICES, INC.

Principal Place of Business Mailing Address											
50 FREMONT STREET 4TH FLOOR SAN FRANCISCO CA 94105 US				50 FREMONT STREET 4TH FLOOR SAN FRANCISCO CA 94105-2230							
				US			3. Date Incorporated or Qualified 06/23/1995	06/23/1995 05/01/1996			
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For			
21				26			<del></del>	94-2964150 Not Applicable			
Suite, Apt. #, etc. 22				Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Regulred			
City & State				City & State				6. Election Campaign Financing	_		May Be
Zip Country				Zip Country			<del></del>	Trust Fund Contribution	L	<del></del>	to Fees
24	25			դ ՝ իսող				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
9. Name and Address of Current								10. Name and Address of New Registered Agent			
СТ					ε	11	Name		<del></del>	·	
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION FL 33324						12	Street Addre	ss (P.O. Box Number is Not Acceptal	ole)		<del></del>
						13	1	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1			
					- E	34	City			85 Zip	Code
							•		FL	. [ ]	
<b>11.</b> Pursuant f office or ri agent. I ai	to the provision egistered ager m familiar with,	ns of Sections 607.0 nt, or both, in the St , and accept the ob	0502 and 6 ate of Florid digations of	07.1508, Florida Statu da. Such change was f, Section 607.0505, Fl	tes, the abo authorized lorida Statu	by tes	-named corpo the corporatio	oration submits this statement for the pon's board of directors. I hereby acce	ourpose o	f changing pointment as	its registered s registered
SIGNATURE	F	printed name of registered	as and and before	d near poble	IC Denistred		nt signature require	d when relatives	DATE		
12.	adians structi	OFFICERS A	* ***		13.	- Ger	ur ethurina redous	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
TILE	DCP			DELETE	1.1 TiTL	E	T T			☐ Change	Addition
NAME	BANNER, V	VILLIAM C			1.2 NAM	AE.					
STREET ADDRESS		LUMBUS DR.			1.3 STR	EET /	ADDRESS				
CITY+S1+ZIP	TAMPA FL				1,4 C(T)	/- \$T	T-ZIP				
1016	D			DELETE	2.1 TITL	E				Change	Addition
NAME	ROSENBER	rg, sydney j			2.2 NAM	AE.					
STREET ADDRESS	9831 W. PI				2.3 STA	EET A	address				
CITY - ST - 7(P		LES CA 90035			2. 4 CIT	Y-5	T-ZIP				
TITLE	CFOS			☐ DELETE	3.1 TITL	E				Change	Addition
NAME	PARKER, A				3.2 NAM	AE.					
STREET ADDRESS		LUMBUS DR.			3.3 STA	EET A	ADDRESS				
CITY - SI - ZIP	TAMPA FL	33602		Driett	3.4. CIT	•	T-ZIP	· · · · · · · · · · · · · · · · · · ·		1 (0	a data -
TITLE				☐ DELETE	4,1 TITL					L Change	Addition
MAM:					4. 2 NAJ						
STREET ADDRESS							ADDRESS				
CHY-S1-7/P	<b></b>			☐ DELETE	4.4 CHY		T-ZIP		**********	Chance	Addition
TITLE				FT DEFEIG	5.1 TITL					Change	
NAME					5.2 NAN						
STREET ADDRESS					1		ADDRESS				
CITY+SI+ZIP				DELETE	5.4 CITY		T-ZIP			Change	Addition
TITLE				L. VELETE	6.1 TITL					CHRINGS	LI AUGIEON
NAME CODECT ADDITIONS					6.2 NAN		Anneces				
STREET ADDRESS					6.3 STR		ADDRESS				

14. I do 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

**FILED** 

May 14 1997 8:00am

Secretary of State

A TOOLIGE NIKA TOOLIG SOKI OOLIG AANKI OOLIG AANKI AANGA AANGA AANGA AANGA AANGA AANGA AANGA AANGA AANGA