2000 UNIFORM BUSINESS REPORT (UBR)

Mailing Address 75 BROADWAY

SAN FRANCISCO CA 94111-1428

STE 111

DOCUMENT # F95000003050

500 HOWARD ST 4TH FLOOR

TITLE NAME

STREET ADDRESS

SIGNATURE: \(\times\)

CITY-ST-ZIP

Principal Place of Business

AMERICAN COMMERCIAL SECURITY SERVICES, INC.

SAN FRANCISCO CA 94105 US			SAN FRANCISCO CA 94111-1428 US				1 1 0 1 14 10 121 0 11	1684 BULIO Br iis Br isi (18(11 48)(1 88 (TE (1111 ecie i 4 1	COC BERCE HOOG	
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.			_	DO NOT WRITE IN THIS SPACE					
City & Stat	e		City & State			4. FEI	4. FEI Number 94-2964150				Applied For Not Applicable	
Zip Country			Zip	Zip Country		5. Ce.				\$8.75 Additional Fee Required].
	6. Name	and Address of Current	Registered Agent			7. Na	me and Add	iress of New Re	gistered A	gent]
					Name							1
1200	SOUTH P	TION SYSTEM INE ISLAND ROAD	I		Street Address (P.O. Box Number is Not Acceptable)							-
PLA	ntation f	L 33324		,		FL Zip Code					<u> </u>	1
8. The above		y submits this statement for or printed name of registered agent a	r the purpose of changing and title it applicable		ed office or regis			the State of Flor	ida.			
9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)			FILE NOW!!! FEE IS \$150.00 After MAY 1, 2000 Fee will be \$550.00 Make Check Payable to Department of Sta			State	1 HUST FORD CONSTRUCTION - ACCOUNT OF 663					
11.		OFFICERS AND	DIRECTORS	12.		ADDI	ITIONS/CHA	ANGES TO OFFI	CERS AND			┧ᇩ
TITLE NAME STREET ADDRESS CITY-ST-ZIP	500 HOV	, DENNIS /ARD ST, 4TH FLOOR NCISCO CA 94105	☐ Delete		l l					☐ Change	☐ Addition	R2F034 (9/99)
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CFOS PARKER, 500 HOV	Robert Vard St, 4th Floor Noisco Ca 94105	⊠ Delete							Change	☐ Addition] 5
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MOORE, 500 HOW		□ Delete		, I					☐ Change	☐ Addition	7
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TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							Change	☐ Addition	
TITLE			Delete	TITLE						☐ Change	Addition	}

STREET ADDRESS

VERNON SKELTON

CITY-ST-ZIP

13. 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 drustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 11 or Block 12 if changed, or on an attachment with an address, with all otherwise empowered.

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED

May 23, 2000 8:00 am Secretary of State

05-23-2000 90268 015 ***150.00