FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1	996	DIVIS	ION OF CORPOR	RATIONS		
DOCUM 1. Corporation N	lame	00003447	7 (8)			
PEDUS	SECURITY SERVICES, I	NC.			A LEANIED MAE HEIDI BIHLI BONIA DI	REAL BEAR SEAN BOARD NAVER BLOCK BIRLINGS
Principal Place of	f Business	Mailing Address				
3500 W 1ST S		3500 W 1ST LOS ANGELE				
					3. Date Incorporated or Qualified 07/18/1995	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Add	ess		4. FEI Number 95-3313187	Applied For Not Applicable
Suite, Apt. #,	etc	Suite, Apt. #	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		Orty & State			6. Election Campaign Financing	Fee Required \$5.00 May Be
City & State		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	— ¬	ountry		or intangible tax under si 199.032, es ∷ No
24	9. Name and Address of Curr	ent Registered Agent	30		10. Name and Address of New	
	5. Hame and Addices of Gar.	· · · · · · · · · · · · · · · · · · ·		81 Name		
THE PRE	NTICE-HALL CORPORATION	SYSTEM, INC.		82 Street A	ddress (P.O. Box Number is Not Accept	able)
1201 HA	YS STREET			83		
SUITE 10					ALL PLANTAGE PROPERTY OF THE P	
IALLAN	ASSEE FL 32301			84 City		FL 85 Zip Code
familiar with	i, and accept the obligations of, So	ection bu7.0505, Florida	i Statutes	ne: Agent signature n	poration submits this statement for the place of directors. Thereby accept the apart of the statement of the	DATE FFICERS AND DIRECTORS IN 12
TITLE	DCP		LETE 1	1 TifLE		Change Addition
NAME	BERGER, ALBERT J	, ,		! NAME		
STREET ADDRESS	3500 W 1ST ST LOS ANGELES CA 90004		1	LOTTY - ST - ZIP		
CHTY-ST ZIF	CFOV	D		1 TIFLE	D/9/3/CFO	Change Addition
NAME	JACKSON, RICHARD G	_	2 2	? NAME	41,7010	
STREET ADDRESS	3500 W 1ST ST			STREET ADDRESS		
CITY - ST - ZIP	LOS ANGELES CA 90004			LOTY-SE-ZIP LITTLE		Change Addition
THLE	s Smith, Cheryl L	*		NAME		
STREET ADDRESS	3500 W 1ST ST		31	3 STREET ADDRESS		
City-St-ZiP	LOS ANGELES CA 90004			4 CHY ST-ZIP		Change Addition
TITLE		□ DI		1 TiTLE 2 NAME		☐ c-idilige ☐ Addition
NAME CANCEL ADODESS				Z NAME 3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP				4 CITY - S1 - ZIP	1	
TITLE	<u> </u>			1 TITLE		Change Addition
NAME				2 NAME		
STREET ADDRESS				3 STREET ADDRESS		
CITY-ST-ZIP		<u> </u>		4 CITY - ST - ZIP 1 TITLE		Change Addition
TITLE NAME		, , , , , , , , , , , , , , , , , , ,	B	2 NAME		
STREET ADDRESS			6	3 STREET ADDRESS		
CITY CT 710				4 CITY - ST ZIP		AO OZIONIA FIA IZ OCIAZ I IZ P
14. I do hereb certify that oath; that I appears in	y certify that the information suppli the information indicated on this a Lam an officer or director of the co Block 12 or Block 13 if changed	ied with this filing is volu annual report or suppler orporation or the receive or on an attachment w	intarily furnished au mental annual repo ii or trustee empo ith an address	nd does not qui ort is true and ad wered to execu	alify for the exemption stated in Section of courate and that my signature shall have te this report as required by Chapter 607	। 19.07/3)(K), Horida Statutes, Fluthier The same legal effect as if marie under ', Florida Statutes; and that my name

SIGNATURE:

LICE AND TYPES OR PRIVITED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/56