

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # F95000006299 (0)

1. Corporation Name

SUPERIOR SECURITY PRODUCTS, INC.



Principal Place of Business

G/O J. ROBIN TURNER, P.A.  
PO BOX 11040  
COLUMBIA SC 29211

Mailing Address

G/O J. ROBIN TURNER, P.A.  
PO BOX 11040  
COLUMBIA SC 29211

2. Principal Place of Business

21 2215 PLATT SPRINGS ROAD

Suite, Apt. #, etc.

22 City & State

23 WEST COLUMBIA, SC

24 Zip 29169 25 Country USA

2a. Mailing Address

26 c/o: K. SEXTON, CPA

Suite, Apt. #, etc.

27 P. O. BOX 1639

City & State

28 COLUMBIA, SC

29 Zip 29202-1639 30 Country USA

3. Date Incorporated or Qualified

12/26/1995

3a. Date of Last Report

4. FEI Number

57-1012176

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

CAIN, RANDY  
224 STEVENAGE DR  
LONGWOOD FL 32779

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 Sections 607.0502 and 607.1508, 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

Signature typed or printed name of registered agent (do not sign this block)

(Do Not Sign) Registered Agent Signature required when registering

DATE

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME GIBSON, MICHAEL I  
STREET ADDRESS 2215 PLATT SPRINGS RD  
CITY-ST-ZIP W COLUMBIA SC 29169

TITLE  
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CITY-ST-ZIP

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NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

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(3)(k), 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 appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE: MICHAEL I. GIBSON, PRESIDENT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(803) 791-8300

DATE

Original Filing #

CR2E034 (12/95)