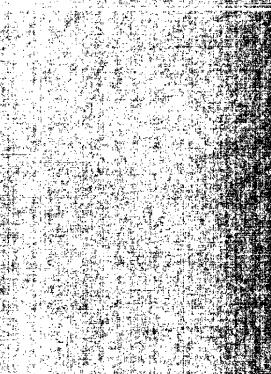
## 



Annual Report Filed April 15, 1991 000002566310--5

apgs.

## FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION /12 ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE Jim Smith Secretary of State DIVISION OF CORPORATIONS

APR 15:11

APPROVED FL. DEPT, OF STATE CORPORATIONS DIV. TALLAHASSEE, FL. FILED

1, Name and Mailing Address of Corporation: DOCUMENT #G02019

(9)

ZIP + 4 PRESORT

8 VANGUARD SECURITY, INC. 8 9572 NORTHWEST 41ST STREET MIAMI, FL. 33178-2304

If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

DO NOT WRITE IN THIS SPACE

21 Street Address 22 P.O. Box No. 23 City and State 24 Zip Code

If above address is incorrect in any way, enter the correct address in item 2, Include Zip Code.

P	SHOPAY, DAVID H	1.	9572 N.W. 41 ST.	MIA	MI, FL
Title	Names of Officers and Directors		Officer and Director  3 (Do NOT Use Post Office Box Numbers)	4	City and State
6. Names	and Street Addresses of Each Off	icer and Director (Do no	t use any correction tape or fluid to cover over incor	rect information	1.) ±
To Do Business in Florida		59-2227469	FEI Number N		CERTIFICATE OF STATUS DESIRED
3. Date Incorporated or Qualified		4. FEI Number	FE' Number A	Applied For	for a Certificate of Status

P	SHOPAY, DAVID H.	9572 N.W. 41 ST.	MIAMI, FL	
S	SHOPAY, REBECCA L.	9572 N.W. 41 ST.	MIAMI, FL	
				* *
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				na halastar yapapankan yaki kater 1935-yin dada gaga mara kate 1 marapan kata kater dan dalam 1 marapan kater kate		2.
						<u> </u>
			, . e.e. ; p	8 Name and Address of New F	logistered Agent	
	REGISTERED AGENT INFORMATION		81	Name and Address of New 1	000000000000000000000000000000000000000	
	7. Name and Address of Current Registered Agent	·	82	Street Address 1 (Do NOT Use PO Box Number	F	• •

SHOPAY, DAVID H. Street Address 2 (Do NOT Use PO, Box Number) 9572 N.W. 41 ST. MIAMI, FL. 33166 81

	34
The state of the s	above-named corporation submits this statement for the purpose of changing its registeror by the corporation's board of directors
	the number of changing its registration and the second of changing its registration
and the first of the same of t	above served corporation submits this statement for the purpose of changing its registerer
and 607 1508, Figure 518 and 607 1508, Figure 518 in the state of the	SDDALLINING COLDSTITION SEPTIMO
<ol><li>Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the displacement of the provisions of Sections 607,0502 and 6</li></ol>	husba conceptor's board of directors
The state of Florida, Such change was authorized to	Dy the Colboration a country of amounts
office or registered agent, or both, in the State of Florida, Such change was authorized to	The state of the s
office of registered again, or down	The second Continue 607 0605, Florida Statutes
and the familiar with and accept the	applications or pecificition and it introduces.

I nereby accept the appointment as registered agent, I am

(Registered Agent Accepting Appointment)

10. I 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. I further certify 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 their my name appears in Block 6 or on an attachment with an address

Typed Name of Signing Officer or Director

Telephone Number Daytime (305

FILING FEE OF \$61.25 REQUIRED — Make Checks Payable To: Secretary of State \$8.75 Additional Fee required

85 Zip Code