FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION
ANNUAL REPORT
1995

DOCUMENT # **G39964** **(3)**

1. **VINCENT J. WARGER SECURITY CONSULTANTS, INC.**

APPROVED
AND
FILED

95 MAY -1 AM 10:04

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

8820 S.W. 150TH STREET **MIAMI FL 33176**	**8820 S.W. 150TH STREET** **MIAMI FL 33176**

(Letter ABOVE the THIS SPACE)

21	26	3. Date Incorporated / Qualified: **05/23/1983**	3a. Date of Last Report: **04/21/1994**
22	27	4. FEI Number: **59-2308504**	Applied For / Not Applicable
23	28	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
24 / 25	29 / 30	6. Election Campaign Financing Trust Fund Contribution. ☐	**$5.00** May Be Added to Fees
		8. Did corporation have liability for intangible tax under S. 199.032, Florida Statutes: ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
WARGER, VINCENT J. **8820 S.W. 150TH STREET** **MIAMI FL 33176**	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 Section 607.325, 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. The corporation authorizes the officers to effect the changes listed above. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.325, Florida Statutes.

SIGNATURE

12. OFFICER AND DIRECTOR	13. ADDITIONS/CHANGES TO OFFICER AND DIRECTOR
TITLE: P NAME: WARGER, JOAN Q. STREET ADDRESS: 8820 SW 150TH ST CITY-ST-ZIP: MIAMI, FL 00000	☐ Change ☐ Addition
TITLE: C NAME: WARGER, VINCENT J. STREET ADDRESS: 8820 SW 150TH ST CITY-ST-ZIP: MIAMI, FL 00000	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition
TITLE: NAME: STREET ADDRESS: CITY-ST-ZIP:	☐ Change ☐ Addition

14. I/We hereby certify that the information supplied with this 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 above with an asterisk (*) before it.

SIGNATURE: Joan Q. Warger
SIGNATURE AND TYPED OR PRINTED NAME OF DIRECTING OFFICER OR DIRECTOR
JOAN Q. WARGER

5/1/95 (305) 233-1115
Date / Daytime Phone #

0102904 CP