

FILE NOW: FILING FEE AFTER MAY 1 IS \$50.00

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # **H22730 (6)**

1. Corporation Name

A&W SECURITY, Company, Inc.

Principal Place of Business

Mailing Address

8362 Pines Blvd.
Suite 298
Pembroke Pines, FL 33035

same
~~4831 Polk St.~~
~~Hollywood, FL~~
~~33021~~

2. Principal Place of Business

21 4831 Polk St.

Suite, Apt. #, etc.

22

City & State

23 Hollywood, FL

Zip

24 33021

Country

25 Brownad

Zip

26 33021

2a. Mailing Address

26 4831 Polk St.

Suite, Apt. #, etc.

27

City & State

28 Hollywood, FL

Zip

29 33021

Country

30 Brownad

3. Date Incorporated or Qualified

9-25-84

3a. Date of Last Report

2-22-1996

4. FEI Number

59-2464346

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

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

10. Name and Address of New Registered Agent

61 Name

62 Street Address (P.O. Box Number is Not Acceptable)

63

64 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

D. P. Arcuri (Pres)

4-22-97

(Note: If the printed name of registered agent and title if applicable)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

DELETE

11 TITLE

Change

Addition

NAME

**DD
Arcuri, Anthony P.
4831 Polk St.
Hollywood, FL 33021**

12 NAME

STREET ADDRESS

13 STREET ADDRESS

CITY, ST, ZIP

14 CITY, ST, ZIP

TITLE

DELETE

21 TITLE

Change

Addition

NAME

22 NAME

STREET ADDRESS

23 STREET ADDRESS

CITY, ST, ZIP

24 CITY, ST, ZIP

TITLE

DELETE

31 TITLE

Change

Addition

NAME

32 NAME

STREET ADDRESS

33 STREET ADDRESS

CITY, ST, ZIP

34 CITY, ST, ZIP

TITLE

DELETE

41 TITLE

Change

Addition

NAME

42 NAME

STREET ADDRESS

43 STREET ADDRESS

CITY, ST, ZIP

44 CITY, ST, ZIP

TITLE

DELETE

51 TITLE

Change

Addition

NAME

52 NAME

STREET ADDRESS

53 STREET ADDRESS

CITY, ST, ZIP

54 CITY, ST, ZIP

TITLE

DELETE

61 TITLE

Change

Addition

NAME

62 NAME

STREET ADDRESS

63 STREET ADDRESS

CITY, ST, ZIP

64 CITY, ST, ZIP

14. I do 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 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 in an attachment with an address.

SIGNATURE:

D. P. Arcuri (Pres)

BIGATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

200002158592
-04/29/97-01076-037
***165.00

4-22-97
Date

(954) 963-2255
Daytime Phone #

CR2E034 (9/96)