SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.

CITY-ST-ZIP

AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) **PROFIT** FLORIDA DEPARTMENT OF STATE CORPORATION FILED Sandra B. Mortham **ANNUAL REPORT** Secretary of State 1997 DIVISION OF CORPORATIONS 98 APR 17 AM 11: 19 DOCUMENT # H87628 (4)SECRETARY OF STATE TALLAHASSEE, FLORIDA SECURITY ADVANTAGE, INC. Principal Place of Business Mailing Address 13270 SW 131 ST 13270 SW 131 ST. STE 131 STE 131 MIAMI FL 33186 MIAMI FL 33186 DO NOT WRITE IN THIS SPACE 3a. Date of Last Report US. 3. Date Incorporated or Qualified 11/25/1985 4. FEI Number 01/17/1996 2. Principal Place of Business 2a. Mailing Address 26 15552 Su Applied For 15552 SW 148 Jerr Sulte, Apt. #, etc. 18 Terr 26 21 59-2617319 Not Applicable Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required City & State City & State 8. Election Campaign Financing \$5.00 May Be Miami Miami 23 Trust Fund Contribution Added to Fees Country 8. This corporation owes or has paid the current year Intangible 25 29 Personal Property Tax due June 30. Yes ☐ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent BOWEN, RICHARD W. 13270 SW 131 ST Street Address (P.O. Box Number is Not Acceptable) 82 **STE 131** 83 MIAMI FL 33186 CIPM read 84 Zip Code 33/56 85 Kichard W. 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (4/97 TITLE DELETE 1.1 TITLE ➤ Change Addition NME **BOWEN, RICHARD W.** 15552 S.W. 148 Tunce Mrs. Au 33186 1.2 NAME STREET ADDRESS 14468 SW 83 ST 1.3 STREET ADDRESS MIAMI FL CITY-ST-ZIP 1.4 CITY - ST - ZIP DELETE TITLE 21 TITLE Addition NAME **BOWEN, MARGARET** 22 NAME 15552 SD. 148 Tomore 14468 SW 83 ST STREET ADDRESS 2 3 STREET ADDRESS Miens, The 33196 Miami Fl. CITY-ST-ZIP 2 4 CITY-ST-ZIP TITLE DELETE Change 3.1 TITLE Addition NAME BOWEN, MARY 3.2 NAME 200002497162--4730 SW 112 AVE STREET ADDRESS 3.3 STREET ADDRESS -04/22/98--01105--008 MIAMI FL CITY-ST-ZIP 3 4. CITY - ST - ZIP ****300.00 ****300.00 DELETE TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-Z 4 4 CITY - ST - ZIP Change DELETE TITLE 51 TITLE ☐ Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP DELETE TITLE Change 61 TITLE Addition NAME 62 NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 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 in the receiver or an attachment with an activess.