

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jul 08, 1999 8:00 am
Secretary of State

07-08-1999 90006 027 ***163.75

DOCUMENT # **J26903**

1. Corporation Name

RODRIGUEZ PROTECTIVE ALARM, INC.

Principal Place of Business
**7091 SHERIDAN STREET
HOLLYWOOD FL 33024**

Mailing Address
**7091 SHERIDAN STREET
HOLLYWOOD FL 33024**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/04/1986

4. FEI Number

59-2709622

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

8. This corporation owes the current year
Intangible Personal Property. ☒ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**RODRIGUEZ, LUIS
7091 SHERIDAN STREET
HOLLYWOOD FL 33024**

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 and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PSD** ☐ DELETE

NAME **RODRIGUEZ, LUIS**
STREET ADDRESS **7091 SHERIDAN ST.**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE **VT** ☐ DELETE

NAME **RODRIGUEZ, LUIS**
STREET ADDRESS **7091 SHERIDAN ST**
CITY-ST-ZIP **HOLLYWOOD FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (5/99)

RODRIGUEZ PROTECTIVE ALARM, INC.

J26903

582941-90006-27

July 1, 1999

Division of Corporations
409 East Gaines Street
Tallahassee, FL 32399
(850) 488-9000

**RE: 1999 PROFIT CORPORATION ANNUAL REPORT
RODRIGUEZ PROTECTIVE ALARM, INC.**

Dear Sirs:

Enclosed please find the above referenced report along with check # 2202 for \$163.75. This check represents my filing fee of \$1500 plus, \$13.75 of additional fees, as instructed by your office during a telephone conversation earlier today.

Please note that I did not receive the original report packet, and that only today did my next door neighbor deliver to me the second notice report packet. I apologize for an inconvenience that this may create, but respectfully request that you accept my filing fee in light of the difficulty I experienced receiving the packets.

Should you have any questions, please don't hesitate to give me a call at (954) 961-5460.

Sincerely,

RODRIGUEZ PROTECTIVE ALARM, INC.

Luis Rodriguez
President