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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J30595

STREET ADDRESS

BRANDENBURG SECURITY & COMMUNICATION SYSTEMS, IN

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Principal Place	e of Business	Mai	iling Address							
9 PALM PLAZA HOMESTEAD FL 33030 9 PALM PLAZA HOMESTEAD FL 33030										
	-						DO NOT W	VRITE IN THIS	S SPACE	
							Date Incorporated or Qualif	fed		
							08/27/1986			
2. Principal Pl	lace of Business	2a.	Mailing Address			•	4. FEI Number		Α	pplied For
21	•	26					59-2742594		N	ot Applicable
Suite, Apt.	#, etc		Suite, Apt. #, etc.				- 0 17 14 16 16 17	. 152	\$8.75	Additional
22		27					5. Certifcate of Status Desired	± (2)	Fee R	equired
City & State	e		City & State			••	6. Election Campaign Financia	na 🕳	\$5.00	May Be
23		28					Trust Fund Contribution	'' ⁹ 🗆	•	to Fees
Zip	Country		Zip	Cou	intry		8. This corporation owes the o	current vear In	ntangible	
	25	29	•	30	-		Personal Property Tax.	•	ŬYes	⊠ No
24 25 29 29 9. Name and Address of Current Registered Agent			00	10. Name and Address of New Registere			Agent			
		71°)	2	10-11	81	Name		 	 	
BRAI	NDENBURG, MICHAEL L.	••			Ш				•	
	ILM PLAZA			`, - [*]	82	Street Add	ress (P.O. Box Number is Not Acce	eptable)		
	MESTEAD FL 33030				83		- 18 A 18	9 9 9 9 9 9	4 Y 1 - 10 12 W	3.1.7.7.1981 3.1.7.7.1981
11011	LOTEAD TE GOOD				63					
					84	City				Code
	· ·					-			_ `	
								the purpose o	f changing it:	s registered
11. Pursuant	to the provisions of Sections 607.	.0502 and 60	7.1508, Florida St	atutes, the a	bove	-named corp	poration submits this statement for ion's board of directors. I bereby at	cent the anno	sintment as re	egistered
office or r	egistered agent, or both, in the SI	tate of Florida	a. Such change wa	is authorized	1 by 1	the corporation	poration submits this statement for ion's board of directors. I hereby ac	cept the appo	ointment as re	egistered
office or n agent. I a	to the provisions of Sections 607 egistered agent, or both, in the St m familiar with, and accept the ob	tate of Florida	a. Such change wa	is authorized	1 by 1	the corporation	poration submits this statement for ion's board of directors. I hereby ac	cept the appo	ointment as re	egistered
office or r	egistered agent, or both, in the SI	tate of Florida bligations of,	a. Such change wa Section 607.0505,	is authorize Florida Stat	iby i utes.	the corporation	ed when reinstating).	DATE	onument as n	egistered
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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, with all other like empowered.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

Feb 01, 1999 8:00am

Secretary of State

02-01-1999 90039 049 ***158.75