FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

INTERNATIONAL SECURITY AGENCY INC

FILED Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90038 020 ***150.00

HALFIHAV	THONAL SECOND F AGE								
Principal Place of Business Mailing Address									
1809 S. ATLANTIC AVENUE 1809 S. ATLANTIC AVENUE DAYTONA BEACH FL 32118 DAYTONA BEACH FL 32118						DO NOT WRITE IN THIS SPACE			
							3. Date Incorporated or Qualifed 01/29/1987		
2. Principal Pl	ace of Business	2a.	Mailing Address	· · · · · ·			4. FEI Number Applied For		
21		26	6				59-3124646 Not Applicable		
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				\$8.75 Additional		
22		27					ree Kequileu		
City & State			City & State			•	6. Election Campaign Financing \$5.00 May Be		
23		28					Trust Fund Contribution Added to Fees		
Zip Country		 	Zip Country				8. This corporation owes the current year Intangible Personal Property Tax.		
24	25	[29]		30			Personal Property Tax. LI Yes ATINO 10. Name and Address of New Registered Agent		
···	9. Name and Address of Curr	ent Regis		81	Τ.	Name ·	TV. Name and Address of New Negistered Agent		
LOUCKS, WILLIAM E.									
MANACO, SMITH, HOOD, PERKINS, LOUCKS, & ST				82	: :	Street Addres	ress (P.O. Box Number is Not Acceptable)		
444 SEABREEZE BLVD., SUITE 900			ο, α ο ι	83	+				
DAYTONA BEACH FL 32118			•						
				84	1	City	FL 85 Zip Code		
office or re agent. La	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florid	a. Such change was au	ithorized by	/ the	named corpor e corporation	ration submits this statement for the purpose of changing its registered is board of directors. I hereby accept the appointment as registered		
SIGNATURE	Signature, typed or printed name of registered	egent and title i	applicable. (NOTE:	Registered Age	ent si	gnature required v			
12.	OFFICERS	AND DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TILE	VPST		☐ DELETE	1.1 TITLE			☐ Change ☐ Addition		
NAME	HOOK, ERIC			1.2 NAME					
STREET ADDRESS	1809 S ATLANTIC AVE			1.3 STREE	T AE	DDRESS			
CITY-ST-ZIP	DAYTONA BEACH FL			1.4 CITY-5	ST-Z	ZIP	☐ Change ☐ Addition		
TITLE			DELETE	2.1 TITLE					
NAME				2.2 NAME		İ	·		
STREET ADORESS				2.3 STREE					
CITY-ST-ZIP			DELETE	2. 4 CITY-	ST-Z	ZIP	☐ Change ☐ Addition		
TITLE			∴ DELETE	3.1 TITLE			_ onenge _ product		
NAME			•	3.2 NAME		DDDE66			
STREET ADORESS				3.3 STREE 3.4. CITY-		l l			
CITY-ST-ZIP TITLE	<u> </u>		☐ DELETE	4.1 TITLE		CH	☐ Change ☐ Addition		
NAME			 - -	4. 2 NAME					
STREET ADDRESS				4.3 STREE		DORESS			
CITY-ST-ZIP				4.4 CITY-5					
TITLE			☐ DELETE	5.1 TITLE			☐ Change ☐ Additi		
NAME				5.2 NAME					
STREET ADDRESS				5.3 STREE	ET AI	DORESS			
CITY-ST-ZIP			• •	5.4 CITY-5	ST-Z	ZIP			
TITLE			☐ DELETE .	6.1 TITLE			. Change Addition		
NAME			•	6.2 NAME					
STREET ADDRESS	अध्य स्टब्स्स स्टब्स			6.3 STREE	ET AL	DORESS			
	and come of a receive	7.		6.4 CITY-5	ST-Z	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, with all other like empowered.

SIGNATURE: