## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 J99545 **DOCUMENT #** 

(2)

1. Corporation Name

SAFE AND SECURE ALARMS INC.

3. Date Incorporated or Qualified 3a. Date of Last Report

Principal Place of Business				
% JOSEPH PETER DREVENAK 13590 COOPER ROAD				
SPRING HILL FL 34609				

% JOSEPH PETER DREVENAK 13590 COOPER ROAD SPRING HILL FL 34609

Mailing Address

				10/15/19	87	05/01/1995
2. Principal Place of Business		2a. Mailing Addr	ress	4. FEI Number		Applied For
1		26		59-2864	4205	Not Applicable
Suite, Ap	t.#, etc.	Suite, Apt. #	, etc.	5. Certificate of S	Status Desired	\$8.75 Additional Fee Required
City & Sta	ate	City & State		6. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation	on has liability for intangit	ole tax under s. 199.032,
4]	25	29	30	Florida Statute		
	g. Name and Address of Cur	rrent Registered Agent		10. Name and A	ddress of New Registe	red Agent
			81	Name		
	/ENAK, JOSEPH PETER O COOPER RD.		82	Street Address (P.O. Box Number	r is Not Acceptable)	
SPRING HILL FL 34609		83				
			84	City		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 priviled name of registered agent and tille if ap-	plicable. (NOT	E: Registered Agent signature required	
12.	OFFICERS AND DIRECT		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	□ DELETE	1. 1 TITLE	Change Addition
NAME	Drevenak, Joseph Peter		1.2 NAME	
STREET ADDRESS	13590 COOPER RD.		1.3 STREET ADDRESS	
CITY - ST - ZIP	SPRING HILL FL		1.4 CiTY-ST-ZIP	
THILE	VTS	☐ DELETE	2 1 TITLE	☐ Change ☐ Addition
NAME	Drevenak, illuminada		2.2 NAME	
STREET ADDRESS	13590 COOPER RD.		2.3 STREET ADDRESS	
CITY - ST - ZIP	Spring Hill Fl		2.4 CITY - ST - ZIP	
TITLE		☐ DELETE	3. 1 TITLE	☐ Change ☐ Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3. STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		☐ DELETE	4 1 TITLE	Change Addition
NAME			4.2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-SI-ZIP			4.4 CITY - ST - ZIP	
TITLE		☐ DELETE	5. 1 TITLE	☐ Change ☐ Addition
NAME			5 2 NAME	
STHEFT ADDRESS			5 3 STREET ADDRESS	
CITY-ST-ZIP			54 CHY-SI-ZIP	
TITLE		DELETE	6. 1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	
CHY+ST-ZIP			6.4 CITY - ST - ZIP	

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

P DRCURUAK 1/29/96 352-688-2222

CR2E034 (12/95)