

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

FILED
May 06, 1999 8:00 am
Secretary of State

05-06-1999 90242 023 ***150.00

DOCUMENT # K14872

1. Corporation Name

SUNTECH SECURITY SYSTEMS, INC.

Principal Place of Business

% RICHARD RICE
689 BELFAST TERR
SEBASTIAN FL 32958

Mailing Address

% RICHARD RICE
689 BELFAST TERR
SEBASTIAN FL 32958

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/15/1988

4. FEI Number

65-0040952

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

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

2. Principal Place of Business

21 13575 79 St.
Suite, Apt. #, etc.

2a. Mailing Address

26 13575 79 St.
Suite, Apt. #, etc.

City & State

23 Fellsmere, FL

City & State

28 Fellsmere, FL

Zip

24 32948 25 USA

Zip

29 32948 30 USA

9. Name and Address of Current Registered Agent

RICE, RICHARD
689 BELFAST TERR
SEBASTIAN FL 32958

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

13575 79 St

83

84 City

Fellsmere

FL

85 Zip Code

32948

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 ☐ DELETE

NAME
VTD
RICE, SHIRLEY
STREET ADDRESS
689 BELFAST TERR
CITY-ST-ZIP
SEBASTIAN FL

TITLE ☐ DELETE

NAME
PSD
RICE, RICHARD
STREET ADDRESS
689 BELFAST TERR
CITY-ST-ZIP
SEBASTIAN 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
VTD
Rice, Shirley
1.3 STREET ADDRESS
13575 79 St.
1.4 CITY-ST-ZIP
Fellsmere FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
PSD
Rice, Richard
2.3 STREET ADDRESS
13575 79 St.
2.4 CITY-ST-ZIP
Fellsmere, FL

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 with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (11/98)