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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED
Jan 21 1998 8:00am
Secretary of State

1. Corporatio	MENT # L39142 NA BEACH SECURITY, INC.	(9)						
Principal Plac	e of Business	Mailing Address				81841 QISI1 U	IBIA BIBIA LABI	
53 CUMBERLAND AVE 53 CUMBERLAND AVE								
ORMOND BCH FL 32174 ORMOND BCH FL 32174 US US					DO NOT WRITE IN THIS:	SPACE		
·					3. Date Incorporated or Qualified			
- 51					12/29/1989			
2. Principal P	flace of Business	——————————————————————————————————————			4. FEI Number		Applied For	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			NOT APPLICABLE		Not Applicable Additional	
22		27			5. Certificate of Status Desired		Required	
City & State	··· ··································				6. Election Campaign Financing	\$5.00	0 May Be	
23		28			Trust Fund Contribution			
Zip 24	Country 25	Zip 29	Country 30		B. This corporation owes or has paid the cur Personal Property Tax due June 30.	· -/ · - ·		
24	p. Name and Address of Current		[30]		10. Name and Address of New Registered		L1 140	
VAI	N DE MARK, ALEXANDER J			81 Name				
53 CUMBERLAND AVE				82 Street	Address (P.O. Box Number is Not Acceptable)			
ORMOND BCH FL 32174			L		, and the state of			
)	83			1	
li.				64 City	FL	85 Zip	Code	
11. Pursuant office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Sta tule f Florida: Such change was a	es, the ab	ove-named by the corp	corporation submits this statement for the purpose of poration's board of directors. I hereby accept the app	changing ointment a	its registered is registered	
SIGNATURE			onda Stati	ites.				
	Signature, typed or printed name of registered agent OFFICERS AND			Agent signature	e required when reinstaling) DATE	DIDECTO		
12, TITLE	P	DELETE	13.	LE .	ADDITIONS/CHANGES TO OFFICERS AND	Change		
NAME	LEEDS, J. PETER		1.2 NA	1				
STREET ADORESS	105 SOUTH ST., APT. 8		1.3 STF	REET ADDRESS			[8	
CITY-ST-ZIP	DAYTONA BEACH FL		1.4 CIT	Y-ST-ZIP				
THILE	VP	DELETE	2.1 117	Lŧ		Change	Addition	
NAME	VAN DE MARK, ALEXANDER J		2.2 NAI	ME				
STREET ADDRESS	53 CUMBERLAND AVE ORMOND BCH FL		•	HEET ADDRESS			ļ	
CITY-ST-ZIP TITLE	ONMORD BOTI PL	DELETE	2 4 CF	Y-ST-ZIP		Change	Addition	
NAME		<i>b</i>	3.1 IIII	_		L) OHAHYE	☐ voninati	
STREET ADDRESS			1	REET ADDRESS				
CITY-ST-ZIP				Y-S1-ZIP				
TITLE		DELETE	4.1 T(T)	LE .		Change	Addition	
NAME	r •te 1		4. 2 NA	ME			ļ	
STREET ADDRESS	en e	• •	4.3 STF	ieet address				
CITY-ST-ZIP		DELETE		Y-ST-ZIP		Change	Addition	
TITLE NAME		L.) DELETE	5.1 TITE 5.2 NAI			☐ Change	Addition	
STREET ADDRESS				EET ADDRESS				
CITY-ST-ZIP				Y - S1 - ZIP				
TITLE		DELETÉ	6.1 TITI			Change	Addition	
NAME			6.2 NA	ME.				
STREET ADDRESS			63 STA	EET ADDRESS				
CITY-ST-ZIP	Take about the first the second second	ALL CITY		Y-S1-ZIP				
14. I nereby c	sertify that the information supplied with	this filing does not qualify fo	r the exer	mption state	ed in Section 119.07(3)(i), Florida Statutes. I further ce	rufy that th	e information	

14. I hereby certify that the information supplied with this filling 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; 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. ALEXANDER VAN DE MAIK Office

1/7/98

(904)673-7855