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PROFIT CORPORATION ANNUAL REPORT

1996

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **L49775** **(4)**

1. Corporation Name
ABD SECURITY SYSTEMS, INC.

Principal Place of Business	Mailing Address
~~3300 NOWATA RD~~ ~~LANTANA FL 33462~~ 1305 CENTRAL TERRACE LAKE WORTH, FL - 33460	~~3300 NOWATA RD~~ ~~LANTANA FL 33462~~ 1305 CENTRAL TERRACE LAKE WORTH, FL 33460

	Principal Place of Business	Mailing Address
2.	21 1305 CENTRAL TERRACE	26 1305 CENTRAL TERRACE
Suite, Apt. #, etc.	22	27
City & State	23 LAKE WORTH, FL	28 LAKE WORTH, FL
Zip / Country	24 33460 / 25 USA	29 33460 / 30 USA

3. Date Incorporated or Qualified: 02/08/1990
3a. Date of Last Report: 02/06/1995

4. FEI Number: 65-0192571 ☐ 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 has liability for intangible tax under s. 199.032 Florida Statutes ☐ Yes ☒ No

9. **Name and Address of Current Registered Agent**

DUNTZ, HOWARD E.
~~3300 NOWATA RD~~
~~LANTANA FL 33462~~

10. **Name and Address of New Registered Agent**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable): 5060 ROYAL PALM BEACH BLVD

83

84 City: ROYAL PALM BEACH **FL** 85 Zip Code: 33411

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: _____ (Registered Agent signature required before mailing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
	D DUNTZ, RICHARD 1915 IRIS ROAD WEST PALM BEACH FL		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☒ Addition VP - DIRECTOR DUNTZ, HOWARD 5060 ROYAL PALM BEACH BLVD ROYAL PALM BEACH, FL. 33411
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

14. I do 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)(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.

SIGNATURE: HOWARD E. DUNTZ V.P.V — 1-31-96 — 407-586-5822
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)