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May 07 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # L58348 (8)
1. Corporation Name
INTER-AMERICAN SECURITY PRODUCTS, INC.



Principal Place of Business
% KENNETH G. LANCASTER
5975 SUNSET DR., SUITE 301
S. MIAMI FL 33143

Mailing Address
% KENNETH G. LANCASTER
5975 SUNSET DR., SUITE 301
S. MIAMI FL 33143-5198

3. Date Incorporated or Qualified 03/12/1990
3a. Date of Last Report 05/01/1996

2. Principal Place of Business

2a. Mailing Address

21 14091 S.W. 82 PLACE 26 14091 S.W. 82 PLACE
Suite, Apt. #, etc.

4. FEI Number 65-0329913
Applied For
Not Applicable

22 City & State 27 City & State

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

23 MIAMI, FL 28 MIAMI, FL
Zip Country

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

24 33158 25 USA 29 33158 30 USA

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LANCASTER, KENNETH G.
5975 SUNSET DR
SUITE 301
SOUTH MIAMI FL 33143

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 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 printed name of registered agent and fee, if applicable (NOTE: Registered Agent signature required when reappointing) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME KATON, JONATHAN J
STREET ADDRESS 14091 SW 82ND PL.
CITY-ST-ZIP MIAMI FL 33158

1.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.2 NAME ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.3 STREET ADDRESS ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.2 NAME ☐ Change ☐ Addition

14. I do 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, unchanged, or on an attachment with an address.

CR2E034 (9/96)