Apr 30, 1999 8:00 am Secretary of State

04-30-1999 90140 042 ***150.00

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PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L66099

1. Corporation Name

ESBER ALARMS & ELECTRONIC REPAIRS, INC.

Principal Place	of Rúsiness	Mailing Address				-	Bit and Bitta Bittl Batta terr	i isny sityy si	HEND BERNIN BERNIN B	ITMIK MEMIL KUMI
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6821 S.W. 32 ST		3715 SW 60TH AVE				DO NOT WRITE IN THIS SPACE				
MIAMI FL 33155		MIAMI FL 33155						IN THIS	SPACE	
US						1 .	porated or Qualifed			
						04/18/19 4. FEI Number				plied For
2. Principal PI	ace of Business	2a. Mailing Address				1				plied For t Applicable
21	· · · · · · · · · · · · · · · · · · ·	26 Suite Ant # ata				65-0192	<u> </u>		\$8.75	$\overline{}$
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	-			5. Certifcate	• • • • • • • • • • • • • • • • • • • •		Fee Re	
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24	25	·	30	-			Property Tax.	, ,	∐Yes	⊠ No
	9. Name and Address of Curre		** -			10. Name and	Address of New Re	gistered /	Agent	
				81 N	Name					
	er, julio		ŀ	82 5	Strapt Addre	see (P.O. Boy Nu	imber is Not Acceptab	le)		
	I S.W: 32 ST.			` `	Officer Video	255 (1 .0. DOX 140	Milber in 1400 / 1000 piedo			
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			}	84 (City			FL	. 2 2 2	3000
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida Statute	es, the ab	ove-n	named corpo	oration submits th	nis statement for the p	urpose of	changing its	registered
office or p	to the provisions of Sections 607.05 egistered agent, or both, in the Stat	e of Florida. Such change was at	ıtnorized	DV IN	named corpo e corporation	oration submits the n's board of direct	nis statement for the pottors. I hereby accept	urpose of the appoir	changing its ntment as re	registered gistered
office or n agent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the oblig	e of Florida. Such change was at	ıtnorized	DV IN	named corpo e corporation	oration submits the in's board of direct	nis statement for the po ctors. I hereby accept	urpose of the appoir	changing its ntment as re	registered gistered
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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.

6.4 CITY-ST-ZIP

SIGNATURE: