PROFIT CORPORATION ANNUAL REPORT 1998		FL	FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		FILED Apr 16 1998 8:00am Secretary of State		
DOCUI	MENT # L8460 N SECURITY CORPORAT)8	(3)				
Principat Place 1150 S. NOF HOLLYWOOD US	RTH LAKE DR.		orth Lake Dr. OD FL 33019			DO NOT WRITE In 3. Date Incorporated or Qualified	
9 Principal P	lace of Business	2a. Maiting	Address			06/29/1990 4. FEI Number	
21 - 21	iace of business	26 Mailing	Audress			65-0204552	Applied For Not Applicable
Suite, Apt.	#, etc.		Apt. #, etc.				\$8.75 Additional Fee Required
City & State	е	City & 5	State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	3	Country		This corporation owes or has paid Personal Property Tax due June 3	
	g, Name and Address of Curr	rent Registered A	gent			10. Name and Address of New Regi	stered Agent
	NLON, CHARLES			81	Name 4	HANLON, CHARLES	A .
113 -617	O S. MORTH LAKE DR.			82		fress (P.O. Box Number is Not Acceptable	£ 02.
	LLYWOOD FL 33019			83	11.	SO S. NORTH LAK	<u> </u>
				84	Oib.	Property Appendix	leel 3:- O-d-
				64	City	HOLLYWOOD	FL 85 Zip Code 330)4
11. Pursuant t	to the provisions of Sections 607.0 egistered agent, or both, in the Sta	502 and 607,1508, ate of Florida, Such	Florida Statutes	the above	e-named cor	poration submits this statement for the pur	pose of changing its registered
agent. I ar	m familiar with, and accept the ob	ligations of, Section	1 607.0505, Flori	da Statute	3.	ation's board of directors. I hereby accept	. L. L.
SIGNATURE	Signature, typed or printers owns of registered	spent and title if applicable	e (NOTE:	nA hafalainaB	ni sinnalura rani	pired when reinstating)	TATE DATE
12.		AND DIRECTORS	(1072	13.	an algebraiche requ	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12
TITLE	0		DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	HANLON, CHARLES			1.2 NAME			
STREET ADDRESS	1150 S. NORTH LAKE DR.			1.3 STREET	ADDRESS		
CITY-ST-ZIP	HOLLYWOOD FL			1.4 CITY - S	T-ZIP		
TITLE	VP		DELETE	2.1 TITLE			Change Addition
NAME	HANLON, TIMOTHY P			2.2 NAME	j		
STREET ADDRESS	804 N.E. 10 COURT			2.3 STREET			
CITY - ST - ZIP	FT. LAUDERALE FL		DELETE	2. 4 CITY -	ST-ZIP		[Change [] Addition
TITLE			□ bettere	3.1 TITLE			Change Addition
NAME STREET ADDRESS				3.2 NAME 3.3 STREET	*DDDEEC		
CITY-ST-ZIP				3.4. CITY-:			
TITLE			DELETE	4 1 TITLE	21-58		☐ Change ☐ Addition
NAME				4. 2 NAME	İ		
STREET ADDRESS				4.3 STREET	ADDRESS		
CITY-ST-ZIP				4.4 CITY-S	1		
TITLE			DELETE	5.1 TITLE		THE RESERVE OF THE PARTY OF THE	Change Addition
NAME				5.2 NAME			
STREET ADDRESS				5.3 STREET	ADDRESS		
CITY ST. ZIP				S & CITY . S	T 700		

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.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

SIGNATURE:

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

Little Of COMME

DELETE

4/13/50

954-927-9224

☐ Change ☐ Addition