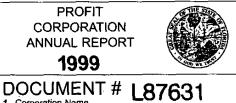
FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999

1. Corporation Name



FLORIDA DEPARTMENT OF STATE

DIVISION OF CORPORATIONS

May 06, 1999 8:00 am Secretary of State Katherine Harris Secretary of State

05-06-1999 90082 038 ***150.00

DELTA SECURITY SYSTEMS, INC.				
			- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	1 BYBEN 613 11 BYBEN 8131 1 BYBEN 1 33 1
Principal Place of Business Mailing Address				
2306 41ST ST EAST 3706 31ST AVE W BRADENTON, FL 34208 BRADENTON FL 34205 US				
			DO NOT WRITE IN THIS SPACE	
_ 05			3. Date Incorporated or Qualifed	
			07/16/1990	
2. Principal Place of Business 2a. Mailing Address			4. FEI Number	Applied For
			65-0213787	Not Applicable
1) 3706 3154 Ave w 26 Suite, Apt. #, etc. 2) BCA denton FL 27			5. Certifcate of Status Desired	\$8.75 Additional Fee Required
City & State City & State			6. Election Campaign Financing	\$5.00 May Be
23 28	28		Trust Fund Contribution	Added to Fees
Zip Country Zip	Country	1	8. This corporation owes the current year	ntangible
24 34205 25 USA 29	30		Personal Property Tax.	Yes TWO
9. Name and Address of Current Registered Agent		,	10. Name and Address of New Registere	d Agent / \
AMBROOF JOSEPH	81	Name		
AMBROSE, JOSEPH	82	Street Addr	ess (P.O. Box Number is Not Acceptable)	
3706.31ST AVENUE W.	<u> </u>	ļ		
BRADENTON FL 32205	83	·		
	84	City		85 Zip Code
		L	F	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Sta office or registered agent, or both, in the State of Florida. Such change was	is authorized by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the app	ointment as registered
agent. I am familiar with, and accept the obligations of, Section 607.0505,	Florida Statutes	S.		
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (N	OTE: Registered Age	at signature (Bouirer	d when reinstating) DATE	
12. OFFICERS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE D DELETE	1.1 TITLE			Change Addition
NAME AMBROSE, JOSEPH	1.2 NAME			
STREET ADDRESS 2306 41ST ST EAST	1.3 STREE	T ADDRESS		
CITY-ST-ZIP BRADENTON FL	1.4 CITY-S	ST-ZIP		
TITLE D DELETE	2.1 TITLE			☐ Change ☐ Addition
NAME HOLDSWORTH, JAMES L JR	2.2 NAME			
1		T ADDRESS		
CITY-ST-ZIP BRADENTON FL	2.4 CITY-	ST-ZIP		
TITLE D DELETE	3.1 TITLE			☐ Change ☐ Addition
NAME HOLDSWORTH, BRUCE A	: 32 NAME			
STREET ADDRESS 2306 41ST ST EAST	3.3 STREE	TADDRESS		
CITY-ST-ZIP BRADENTON FL	3.4. CITY-5			
TITLE DELETE	41.TITLE			Change Addition
NAME	4. 2 NAME			
STREET ADDRESS STREET ADDRESS	4.3 STREE	T ADDRESS		
CITY-ST-ZIP	4.4 CITY-S	ST-ZIP		Change Addition
TITLE DELETE	DELETE 5.1 TITLE			☐ Change ☐ Addition
NAME	5.2 NAME			
STREET ADDRESS		TADDRESS		
CITY-ST-ZIP	5.4 CITY- S	ST-ZIP		Change Addition
TITLE DELETE	•			☐ Change ☐ Addition
NAME	6.2 NAME			
STREET ADORESS	63 STREE	T ADDRESS		

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:

CITY-ST-ZIP