

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 21, 2002 8:00 am
Secretary of State

01-21-2002 90053 003 ***150.00

0296220 AV

DOCUMENT # M07584

1. Entity Name
HI TECHNOLOGY SECURITY SYSTEMS INC.

Principal Place of Business
**13311 S.W. 135TH AVENUE
MIAMI FL 33186**

Mailing Address
**13311 S.W. 135TH AVENUE
MIAMI FL 33186**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number **59-2599422**

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PELAEZ, MAURICIO
1630 S.W. 18TH AVE
MIAMI FL 33145**

Name **Pelaez, Mauricio**
Street Address (P.O. Box Number is Not Acceptable)
13311 SW 135 Avenue
City **Miami** FL Zip Code **33186**

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. ☐
(See criteria on back)

**FILE NOW!!! FEE IS \$150.00
After May 1, 2002 Fee will be \$550.00
Make Check Payable to Department of State**

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

11. OFFICERS AND DIRECTORS

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE **PTD** ☐ Delete
NAME **PELAEZ, MAURICO**
STREET ADDRESS **1630 S.W. 18TH AVE.**
CITY-ST-ZIP **MIAMI FL 33145**

TITLE **PTD** ☒ Change ☐ Addition
NAME **Pelaez, Mauricio**
STREET ADDRESS **13311 SW 135 Avenue**
CITY-ST-ZIP **Miami, FL 33186**

TITLE **VSD** ☐ Delete
NAME **PELAEZ, FERNANDO**
STREET ADDRESS **1630 SW 18 AVE**
CITY-ST-ZIP **MIAMI FL 33145**

TITLE **USD** ☒ Change ☐ Addition
NAME **Pelaez, Fernando**
STREET ADDRESS **13311 SW 135 Avenue**
CITY-ST-ZIP **Miami, FL 33186**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

13. 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 report or supplemental 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01-09-02

Date

305-252-8338

Daytime Phone #

CR2E034 (9/01)