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Mar 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N94000001024 (8)**

1. Corporation Name

THE LAST ALARM FUND CORP.



Principal Place of Business 2815 SALZEDO CORAL GABLES FL 33134 US		Mailing Address 2815 SALZEDO CORAL GABLES FL 33134 US		3. Date Incorporated or Qualified 03/01/1994	
				4. FEI Number 65-0484377	Applied For Not Applicable
2. Principal Place of Business 21		2a. Mailing Address 26		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Suite, Apt. #, etc. 22		Suite, Apt. #, etc. 27		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
City & State 23		City & State 28		7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Zip 24		Country 25		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent SAENZ, RAUL M 8180 NW 36 ST 100 MIAMI FL 33166		10. Name and Address of New Registered Agent	
		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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, RICHARD	1.2 NAME	
STREET ADDRESS	2815 SALZEDO STREET	1.3 STREET ADDRESS	
CITY-ST-ZIP	CORAL GABLES FL 33134	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARCIA, LUIS	2.2 NAME	President Garcia, Luis
STREET ADDRESS	2815 SALZEDO	2.3 STREET ADDRESS	2300 Pinetree Drive
CITY-ST-ZIP	CORAL GABLES FL 33134	2.4 CITY-ST-ZIP	Miami Beach, FL 33140
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GILBERT, JOHN C	3.2 NAME	Director Gilbert, John C.
STREET ADDRESS	2815 SALZEDO	3.3 STREET ADDRESS	85 W. Enid Drive
CITY-ST-ZIP	CORAL GABLES FL 33134	3.4 CITY-ST-ZIP	Key Biscayne, FL 33149
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	Director De Young, Paul
STREET ADDRESS		4.3 STREET ADDRESS	83 East 5th Street
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Hialeah, FL 33010
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	Director Gimenez, Carlos A.
STREET ADDRESS		5.3 STREET ADDRESS	444 S.W. 2nd Avenue
CITY-ST-ZIP		5.4 CITY-ST-ZIP	Miami, FL 33130
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	See Attached Sheet for Additional Directors
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 1/12/98 308-460-5571

CR2E037 (10/97)

Attachment to Non-Profit Corporation Annual Report 1998
The Last Alarm Fund Corp.
Document # N94000001024 (8)

13. Addition

Grier, Jacob
Fire Chief, Homestead Fire Dept.
Homestead Air Force Base
CES/DEF
Homestead, FL 33039

Addition

Paulison, R. David
Fire Chief, Metro Dade Fire Rescue
6000 S.W. 87th Avenue
Miami, Florida 33173