

# 2001 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # P00000085826

1. Entity Name

NEW GENERATION SECURITY, INC.

**FILED**  
**Mar 07, 2001 8:00 am**  
**Secretary of State**

03-07-2001 90004 005 \*\*\*150.00

Principal Place of Business

5320 NW 55TH BLVD STE 208  
COCONUT CREEK FL 33073

Mailing Address

5320 NW 55TH BLVD STE 208  
COCONUT CREEK FL 33073

00021946



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5320 NW 55TH BLVD

3. Mailing Address

13621 WEYBURN DR

Suite, Apt. #, etc.

SUITE 208

Suite, Apt. #, etc.

FL

City & State

COCONUT CREEK, FL

City & State

DELRAY BEACH, FL

4. FEI Number

65-1042875

Applied For

Not Applicable

Zip

33073

Country

USA

Zip

33446

Country

USA

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

FORGIONE, JOE

13621 WEYBURN DRIVE

DELRAY BEACH FL 33446

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, 2001 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 ☐ Delete  
NAME D  
STREET ADDRESS DILLETT, ROWAL  
CITY-ST-ZIP 5320 NW 55TH BLVD STE 208  
COCONUT CREEK FL 33073

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

TITLE ☐ Delete  
NAME PCEO  
STREET ADDRESS DILLETT, ROWAL  
CITY-ST-ZIP 5320 NW 55TH BLVD STE 208  
COCONUT CREEK FL 33073

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

TITLE ☐ Delete  
NAME DV  
STREET ADDRESS LALLA, CLIFFORD  
CITY-ST-ZIP 1234 OLIVE TREE CIRCLE  
GREENACRES FL 33413

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

TITLE ☐ Delete  
NAME DCTS  
STREET ADDRESS FORGIONE, JOE  
CITY-ST-ZIP 13621 WEYBURN DR  
DELRAY BEACH FL 33446

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOSEPH A. FORGIONE 2/28/01 561 394-5011

Date

Daytime Phone #

CR2E034 (10/00)