

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000114955

FILED  
Jan 04, 2003  
Secretary of State

**Entity Name:** PRO-24 SECURITY AND INVESTIGATIVE SERVICES INC.

**Current Principal Place of Business:**

1900 N. UNIVERSITY DR., #101  
PEMBROKE PINES, FL 33024

**New Principal Place of Business:**

**Current Mailing Address:**

318 INDIAN TRACE RD.  
PMB 107  
WESTON, FL 33326 US

**New Mailing Address:**

**FEI Number:** 65-1076368

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SHAW, JACK S  
318 INDIAN TRACE RD  
PMB107  
WESTON, FL 33326 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Election Campaign Financing Trust Fund Contribution ( )**

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: YZER, RUDI  
Address: 10660 NW 2ND CIR.  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: D ( ) Delete  
Name: MUNDY, RICK  
Address: 6831 SW 43 CT.  
City-St-Zip: DAVIE, FL 33314

Title: D ( ) Delete  
Name: SHAW, JACK  
Address: 318 INDIAN TRACE RD., P.M.B. 107  
City-St-Zip: WESTON, FL 33326

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACK SHAW

D

01/04/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date