2004 FOR PROFIT CORPORATION REINSTATEMENT

REINSTATEMENT					₹Q '	= 2	
DOCUMENT # P01000072131							
ALERT SECURITY FLORIDA BY KISER-BECKER GROUP, INC.					PSSE OF	15 星代	
Principal Plac		Mailing Address		A	PPROVEIS 92		
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WATKINSVILLE, GA 30677 WATKINSVILLE, GA 30677					FILED S'	71. 1220. 1324 H ard (121. 1314) I 178.	
2. Principal P	Place of Business Hunt: ngton Rd #, etc.	3. Mailing Address 1. 8.5 Huntin Suite, Apt. #, etc.	Mailing Address 485 Hunting ton Rd Spile, Apt. #, etc.		iniiniiniiniiniinii		
Su, te 197		SuitE 197		10282004 SECRE	REIN-P ITARY OF STATE	CR2E098 (6/04)	
City & State	THENS, GA AYGENS, (CA	4. 17 Numb 58-264	TESEE, FLORID	Applied For Not Applicable	
Zip	Country	/ · · · · · · · · · · · · · · · · · · ·	Country			\$9.75 (444) (474)	
30606 30606			·			Fee Required	
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name							
CT CORPORATION SYSTEM JOhn						h	
1200 S. PINE ISLAND RD. PLANTATION, FL 33324				Street Address (P.O. Box Number is Not Acceptable) John Moxley, P.A.			
				2320 NE 2nd St. Suite 4			
Ocal.				ocala,	th in the State of Florid	34470	
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. I am familiar with, and accept the obligations of registered agent.							
SIGNATURE Julius Noveley John Moxley 11/1/04 Supplicitive, typed or printed rulime of registered agent angles if applicable. (NOTE: Registered Agent signature required when reinstituting) DATE							
FILE NOW!!! FEE IS \$150.00 In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.							
10.	OFFICERS AND I	DIRECTORS	11.	ADDITIONS,	L /CHANGES TO OFFICE	ERS AND DIRECTORS IN 11	
TITLE	D	☐ Defete	TITLE			☐ Change ☐ Addition	
NAME STREET ADDRESS	KISER, PAUL JACK JR 1041 NORTHWOODS RD.		NAME STREET ADDRESS				
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12. 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.							
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SIGNATURE: JACK KISER CEO 19464 TOLS 83-1908 SIGNATURE: SIGNADARE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR CHRECTOR Distance AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR CHRECTOR Distance Printed Printe							