

FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 04, 1999 8:00 am
Secretary of State

03-04-1999 90025 009 ***150.00

DOCUMENT # P22652

1. Corporation Name

PROPERTY SECURITY LIMITED COMPANY

Principal Place of Business

C/O MEPC PLC
103 WIGMORE STREET
LONDON EN W1H 9B
US

Mailing Address

C/O DEAN VEGOSEN
500 S. AUSTRALIAN AVE.
W. PALM BEACH FL 33401
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/20/1989

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes the current year Intangible
Personal Property Tax.

☐ Yes

☐ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VEGOSEN, DEAN
500 SOUTH AUSTRALIAN AVENUE
10TH FLOOR
WEST PALM BEACH FL 33401

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE SD
NAME CAINES, GEOFFREY HAROLD
STREET ADDRESS 48 HARTLEY OLD RD PURLEY
CITY-ST-ZIP SURREY ENGLAND

☒ DELETE

11 TITLE DS
12 NAME MONIZ, CHRISTOPHER MARIO
13 STREET ADDRESS 103 WIGMORE STREET
14 CITY-ST-ZIP LONDON EN W1H 9AG

☐ Change

☒ Addition

TITLE D
NAME COURTAULD, TOBY AUGUSTINE
STREET ADDRESS 103 WIGMORE STREET
CITY-ST-ZIP LONDON EN W1H 9

☐ DELETE

21 TITLE D
22 NAME THOMPSON, NATHAN JAMES
23 STREET ADDRESS 103 WIGMORE STREET
24 CITY-ST-ZIP LONDON EN W1H 9AG

☐ Change

☒ Addition

TITLE D
NAME BATKIN, JOHN WINDSOR
STREET ADDRESS 11 COPTHORNE ROAD, CROKLEY GREEN
CITY-ST-ZIP RICKMANSWORTH EN

☒ DELETE

31 TITLE D
32 NAME WARE, ROBERT THOMAS ERNEST
33 STREET ADDRESS 103 WIGMORE STREET
34 CITY-ST-ZIP LONDON EN W1H 9AG

☐ Change

☒ Addition

TITLE D
NAME BARWICK, CHARLES J.
STREET ADDRESS 103 WIGMORE STREET
CITY-ST-ZIP LONDON EN W1H9A

☒ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME EXLEY, RICHARD J.
STREET ADDRESS 103 WIGMORE STREET
CITY-ST-ZIP LONDON EN W1H9A

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE D
NAME EAST, STEPHEN J.
STREET ADDRESS 103 WIGMORE STREET
CITY-ST-ZIP LONDON EN W1H9A

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

☐ Change

☐ Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

C. M. MONIZ

Date

Daytime Phone #

2-11-99 407 846 6900

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