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FILED
Jan 21 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P92000007823 (7)

1. Corporation Name

KINGALARM DISTRIBUTORS, INC.

Principal Place of Business

690 S MILITARY TRAIL
DEERSFIELD BEACH FL 33442
35 Green St.
Hackensack, NJ 07601

Mailing Address

611 RT 46 WEST
HASBROOK HEIGHTS NJ 07604
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/30/1992

4. FEI Number

65-0382570

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 or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 35 Green St

Suite, Apt. #, etc.

22

City & State

23 Hackensack NJ

Zip

24 07604

Country

25 USA

2a. Mailing Address

26 Suite, Apt. #, etc.

27

City & State

28

Zip

29

Country

30

9. Name and Address of Current Registered Agent

THE PRENTICE HALL CORP SYSTEM INC
1201 HAYS ST
TALLAHASSEE FL 32301

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 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

TITLE ☐ DELETE

NAME
FISCHER, GLENN
STREET ADDRESS
805 LENEL LANE
CITY-STATE-ZIP
FRANKLIN LAKES NJ

TITLE ☐ DELETE

NAME
FISCHER, CHARLES
STREET ADDRESS
0-60 SADDLE RIVER RD
CITY-STATE-ZIP
FAIR LAWN NJ

TITLE ☐ DELETE

NAME
HERSH, GREGORY T
STREET ADDRESS
373 CARRIAGE LANE
CITY-STATE-ZIP
WYCKOFF NJ

TITLE ☒ DELETE

NAME
GOLDBERG, NORMAN
STREET ADDRESS
611 RT 46 WEST
CITY-STATE-ZIP
HASBROUCH HIGHTS NJ

TITLE ☐ DELETE

NAME
SAGAT, ALLEN
STREET ADDRESS
35 GREEN ST
CITY-STATE-ZIP
HACKENSACK NJ

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-STATE-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

1/16/98

21-462-046

CR2E034 (10/97)