FILE NOW: FILING FEE AFTER MAY 1 IS $550.00

PROFIT CORPORATION ANNUAL REPORT **1997**

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

FILED
Mar 18 1997 8:00am
Secretary of State

DOCUMENT # P93000006931 (8)

1. Corporation Name
CITY FIRE ALARMS, INC.

Principal Place of Business	Mailing Address
7299 W FLAGLER ST MIAMI FL 33144	7299 W FLAGLER ST MIAMI FL 33144-2503

2. Principal Place of Business
21
Suite, Apt #, etc.
22
City & State
23
Zip 24 Country 25

2a. Mailing Address
26
Suite, Apt # etc
27
City & State
28
Zip 29 Country 30

3. Date Incorporated or Qualified: 01/28/1993
3a. Date of Last Report: 05/01/1996
4. FEI Number: 65-0385182 — Applied For / Not Applicable
5. Certificate of Status Desired [ ] — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution [ ] — $5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [ ] Yes [ ] No

9. Name and Address of Current Registered Agent
PLASENCIA, GLADYS
15610 SW 146 AVE
MIAMI FL 33177

10. Name and Address of New Registered Agent
81 Name SERRANO, SANTIAGO R.
82 Street Address (P.O. Box Number is Not Acceptable) 705 S.W. 69 AVE
83
84 City MIAMI FL 85 Zip Code 33144

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] SANTIAGO R SERRANO (PRESIDENT) 3-11-97
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	PTD	[ ] DELETE
NAME	SERRANO, SANTIAGO R	
STREET ADDRESS	705 SW 69 AVE	
CITY-ST-ZIP	MIAMI FL 33144	
TITLE	VSD	[ ] DELETE
NAME	PLASENCIA, GLADYS	
STREET ADDRESS	15610 SW 146 AVE	
CITY-ST-ZIP	MIAMI FL 33177	
TITLE	VD	[ ] DELETE
NAME	CABELLO, LUIS	
STREET ADDRESS	6255 SW 129 PL #2206	
CITY-ST-ZIP	MIAMI FL 33183	
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		[ ] DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE		[ ] Change [ ] Addition
1.2 NAME		
1.3 STREET ADDRESS		
1.4 CITY-ST-ZIP		
2.1 TITLE		[ ] Change [ ] Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		[ ] Change [ ] Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		[ ] Change [ ] Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		[ ] Change [ ] Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		[ ] Change [ ] Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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14. I do 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: [signature] 3-11-97 (305) 267-5512