

2002 UNIFORM BUSINESS REPORT (UBR)

FILED
May 29, 2002 8:00 am
Secretary of State

05-29-2002 93596 038 ***150.00

DOCUMENT # P93000007414

1. Entity Name

A CHRIS & MIKE SECURITY INC.

Principal Place of Business

**5915 PLUNKETT ST
 HOLLYWOOD FL 33023
 US**

Mailing Address

**5915 PLUNKETT ST
 HOLLYWOOD FL 33023
 US**



DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

5915 PLUNKETT ST

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

Hollywood FL

Zip

33023

Country

United States

City & State

Zip

Country

4. FEI Number

65-0387611

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional

Fee Required

6. Name and Address of Current Registered Agent

JIMENEZ, RENE F

700 SW 99TH AVENUE

PEMBROKE PINES FL 33025

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

René F. Jimenez (PRESIDENT)

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

(NOTE: Registered Agent signature required when reinstating)

DATE

9. This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so. (See criteria on back)

☐

FILE NOW!!! FEE IS \$150.00

After May 1, 2002 Fee will be \$550.00

Make Check Payable to Department of State

10. Election Campaign Financing Trust Fund Contribution.

☐

\$5.00 May Be Added to Fees

11. OFFICERS AND DIRECTORS

TITLE **P** ☐ Delete
 NAME **JIMENEZ, RENE**
 STREET ADDRESS **700 SW 99 AVE**
 CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE **VP** ☐ Delete
 NAME **JIMENEZ, MAGDA**
 STREET ADDRESS **700 SW 99 AVE**
 CITY-ST-ZIP **PEMBROKE PINES FL**

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
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 CITY-ST-ZIP

TITLE ☐ Delete
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 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Delete
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE ☐ Change ☐ Addition

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NAME
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 CITY-ST-ZIP

13. 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 11 or Block 12 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

René F. Jimenez (RENE F. JIMENEZ)

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

04/15/2002 (654) 964-2003

CR2E034 (9/01)