

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P93000009170 (0)

1. Corporation Name

ICDA SECURITY SERVICES, INC.



Principal Place of Business

3010 NW 17TH AVE.
MIAMI FL 33142
US

Mailing Address

3010 NW 17TH AVE.
MIAMI FL 33142
US

3. Date Incorporated or Qualified
02/05/1993

3a. Date of Last Report
04/07/1995

2. Principal Place of Business

21 Suite, Apt. #, etc

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc

28 City & State

29 Zip Country

4. FEI Number

65-0394435

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

10. Name and Address of New Registered Agent

DIAZ, JOSE A.
3010 NW 17 AVE
MIAMI FL 33142

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 VPSD ☐ DELETE
NAME DIAZ, JOSE A.
STREET ADDRESS 3010 N.W. 17TH AVENUE
CITY-ST-ZIP MIAMI FL

TITLE PD ☒ DELETE
NAME MARTINEZ, MARIO C.
STREET ADDRESS 3010 NW 17 AVE
CITY-ST-ZIP MIAMI FL

TITLE TD ☐ DELETE
NAME DIAZ, RAUL J.
STREET ADDRESS 3010 NW 17 AVE
CITY-ST-ZIP MIAMI FL

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 PRESIDENT / DIRECTOR ☒ Change ☐ Addition
1.2 NAME JOSE A. DIAZ
1.3 STREET ADDRESS 3010 NW 17TH AVE
1.4 CITY-ST-ZIP MIAMI, FL 33142

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE SECRETARY / DIRECTOR ☒ Change ☐ Addition
3.2 NAME RAUL J. DIAZ
3.3 STREET ADDRESS 3010 NW 17TH AVE
3.4 CITY-ST-ZIP MIAMI, FL 33142

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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96

Date

(305) 634-5555

Daytime Phone #

CR2E034 (12/95)