

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 # P93000011152 (4)

1. Corporation Name

J & D SECURITY, INC.



Principal Place of Business

Mailing Address

1828 NE 187TH STREET
N MIAMI BEACH FL 33179

1828 NE 187TH STREET
N MIAMI BEACH FL 33179

2. Principal Place of Business

2a. Mailing Address

21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.
22	City & State	27	City & State
23	Zip	28	Country
24	Country	29	Zip
25		30	

3. Date Incorporated or Qualified
02/15/1993

3a. Date of Last Report
02/28/1995

4. FEI Number
65-0468823

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

BENOMRY, SAMUEL
1828 NE 187TH STREET
N MIAMI BEACH FL 33179

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
85	Zip Code

FL

14. 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

SAMUEL BENOMRY
Signature, typed or printed name of registered agent and true declarer

SAMUEL BENOMRY
Signature, typed or printed name of registered agent and true declarer

05/07/96
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	DELETE	1. TITLE	2. NAME	3. STREET ADDRESS	4. CITY-ST-ZIP	DELETE	5. TITLE	6. NAME	7. STREET ADDRESS	8. CITY-ST-ZIP	DELETE
D	BENOMRY, SAMUEL	1828 NE 187TH STREET	N MIAMI BEACH FL 33179	<input type="checkbox"/>					<input type="checkbox"/>					<input type="checkbox"/>
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***225.00

6-1-96
ASB

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)(g), 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:

SAMUEL BENOMRY
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/7/96

Date of Filing

CR2E034 (12/95)