

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

REPORT
CORPORATION
ANNUAL REPORT
96- 1997

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



FILED

97 JAN 22 PM 2:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P93000024823 (5)

1. Corporation Name

LAS TOP SECURITY, INC.

Principal Place of Business

Mailing Address

1001 NW 54 STR
SUITE N
MIAMI, FL 33127

1001 NW 54 STR
SUITE N
MIAMI, FL 33127

3. Date Incorporated or Qualified
04-05-1993

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

4. FEI Number

Applied For

65-0399030

Not Applicable

21. Suite, Apt. #, etc.

26. Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22. City & State

27. City & State

6. Election Campaign Financing

\$5.00 May Be
Added to Fees

23. City & State

28. City & State

6. Election Campaign Financing

24. Zip

Country

29. Zip

Country

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

LASIS OLADUNNI
1001 NW 54 STR
SUITE N
MIAMI, FL 33127

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, 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 understand and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

[Signature]

LASIS OLADUNNI, PRESIDENT

01-17-97

(NOTE: Registered Agent signature required when re-stating)

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

11. TITLE	12. NAME	13. STREET ADDRESS	14. CITY - ST - ZIP	15. DELETE
PRESIDENT	LASIS OLADUNNI	1001 NW 54 STR, SUITE N	MIAMI, FL 33127	<input type="checkbox"/>
				<input type="checkbox"/>
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE	12. NAME	13. STREET ADDRESS	14. CITY - ST - ZIP	15. DELETE
				<input type="checkbox"/>
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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 is dated 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]* LASIS OLADUNNI 01-17-97 751-6141

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)