

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375)

PROFIT
CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # P93000040793 (0)

1. Corporation Name

PROFESSIONAL LIFE SAFETY SYSTEMS, INC.

FILED

1995 JUL 20 AM 10:18

TALLAHASSEE, FLORIDA

Principal Place of Business

800 E BROWARD BLVD
SUITE 601
FT LAUDERDALE FL 33301

Mailing Address

PO BOX 636434
MARGATE FL 33063-6434
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

06/09/1993

3a. Date of Last Report

05/11/1994

4. FEI Number

65-0421923

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. 190.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

22

City & State

27

Zip

Country

24

Zip

Country

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BELL, DOUGLAS R
800 E BROWARD BLVD
SUITE 601
FT LAUDERDALE FL 33301

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

DATE

(Signature typed or printed name of registered agent and date of signature)

(If Not: Registered Agent separately registered after 06/09/93)

OFFICERS AND DIRECTORS

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

12.

TITLE

NAME

STREET ADDRESS

CITY ST ZIP

D

GIRDLEY, PAUL

800 E BROWARD BLVD SUITE 601
FT LAUDERDALE FL 33301

13.

11 TITLE

12 NAME

13 STREET ADDRESS

14 CITY ST ZIP

☐ Change ☐ Addition

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40 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 110.07(3)(b), 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:

Paul Girdley PAUL GIRDLEY

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

07/10/95 305 760 9678