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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Jul 24 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000043716 (8)

MONARCH FIRE PROTECTION, INC.

Principal Place of Business Mailing Address														//B
13600 S.W. 78 MIAMI FL 3310	O S.W. 78 ST. Al FL 33183-3204													
										3.	Date Incorporated or Qualified		ale of Last I	
2. Principal Place of Business 2a. Mailing Address											<b>06/21/1993</b> . FEI Number	□ 05/	01/1996	
21			26	<b>-</b>					7.	65-0418138		<b>1</b> — 1	Applied For Not Applicable	
Suite, Apt.	#, etc.		1-41	Suite, Apt. #, etc.						·			Additional	
22			27	27					5.	Certificate of Status Desired	LJ		Required	
City & Stat	е		<u></u>	City & State					6.	Election Campaign Financing		\$5.00	May Be	
Zip Country					Zip Country					<u> </u>	Trust Fund Contribution	LJ		to Fees
24	25			29	30			HILA		8.	This corporation has liability for in Florida Statutes		:tax under : ☐ No	s. 199.032,
	9, Name			Istered Agent					10.	. Name and Address of New Reg				
DELGADO, MANUEL A JR									Namo					
	00 SW 78					+	Street Address		P.O. Box Number is Not Acceptab	-				
	MI FL 3318						Street Addies	,5 (I	r.o. box number is not Acceptab	e)				
							83							
							84	1	City				<b>85</b> Zip	Code
## Dunning			007.000					ı	<del>-</del>			<u>FL</u>	.     '	
i office of r	edistered ar	ient or boi	n, in the State o	Horid	ia. Such change w	ras author	rized b	v t	named corpor the corporation	atio n's k	on submits this statement for the probable of directors. I hereby accep	urpose of t the app	changing i ointment as	its registered s registered
ayon. ra	m tamiliar w	ith, and ac	cept the obligati	ons ol,	Section 607.0505	, Florida	Statute	S.						•
SIGNATURE	Signature, typed	or printed nam	o of registered agent	and title i	Lapplicable (	(NOTE: Regi	stered Ag	ent	signature required	when	n reinstating)	DATE		<del></del>
12.		(	OFFICERS AND	DIREC		1	13.			- /	ADDITIONS/CHANGES TO OFFICE	RS AND	DIRECTOR	RS IN 12
TITLE	D				☐ DELETE	1	I.1 TITLE						☐ Change	Addilion
NAME		O, MANU			1.2 NAM									
STREET ADDRESS 13600 S.W. 78 STREET  CITY-ST-ZIP MIAMI FL 33183									DORESS					
CITY-ST-ZIP TITLE	MIAMLE	33183		☐ DELETE	14 CHY DELETE 21 THE			7 17				Change	Addition	
NAME					otte	1	2.2 NAME		1				L_1 change	Munition
STREET ADDRESS							.3 STREET	ΓΑΓ	DOBESS					
CITY-ST-ZIP					2.40						ž.,			
TITLE					DELETE		L1 TITLE						Change	Addition
NAME						3	I.2 NAME							
STREET ADDRESS					•	3	.3 STREET	AD	DORESS					ĺ
CITY-ST-ZIP					- OFFEE		4 CITY-	ST-	-ZIP					
TITLE NAME					[] DELETE		L1 TITLE						☐ Change	Addition
STREET ADDRESS							. 2 NAME		20000					
City-St-Zip							3 STREET		- 1					
TITLE	<del></del>	<del></del>			DELETE		4 CITY-S	)	ZIF				Change	Addition
NAME							2 NAME							
STREET ADDRESS							3 STREET	AD	ODRESS					
CITY-ST-ZIP		-10				5	.4 C(1 Y - S	T - Z	ZIP					
TITLE					☐ DELETE	6	.17111.€						Change	☐ Addition
NAME						6	.2 NAME							
STREET ADDRESS							.3 STREET		1					
CITY-ST-ZIP						6	4 CITY-S	1-2	ZIP					

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 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 12 if chapter or or an effectment with an address