SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT Secretar Division of C					am te					
		P9300006								
BOLLE	OG PROMOTIO	ns investigatio	ON & SECURITY,	INC]] 110/1201 (100 12000 1400 2000 2000 1	lätis Caus musi	1 NUC 18110 A	(1 188 (111 (88)	
Principal Pla	ce of Business	N								
3130 SW 19	\$T	ı			-					
2ND FLR PEMBROKE	PARK FL 33009		V HOLLYWOOD FL 330 IS	83						
US						 Date Incorporated or Qualified 09/14/1993 		te of Last f		_
	Place of Business	r—1	. Mailing Address			4. FEI Number	04/	20/1995 A	applied For	
Suite, Apt	#, etc	26	Suite, Apt. #, etc			65-0435985			lot Applicab	le
22		27	outo, Apr. 4, etc			5. Certificate of Status Desired			Additional lequired	
City & Sta		28	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00	May Be to Fees	
Zip 24			Zιp	<u></u> + −-1	intry	8. This corporation has liability for				
		29 dress of Current Regis	lered Agent	30		Florida Statutes 10. Name and Address of New R	Yes	No	·	
su su	930 NW 26 PL Inrise FL 33322				83 84 City	dress (P.O. Box Number is Not Acceptal			Code	
11. Pursuant office or a agent Ta	to the provisions of Si registered agent, or bi im familiar with, and a	ections 607.0502 and 60 oth, in the State of Florid coept the obligations of	97.1508, Florida Statuti a. Such change was a Section 607.0505, Flo	es, the ab jutriorized proa Stati	ove-named corporations	poration submits this statement for the p tion's board of directors. Thoreby accep	FL urpose of cr the appoin	langing its Iment as re	registered egistered	-
SIGNATURE		and of registere's agent and the								
12.	anglification types for printed to	OFFISERS AND DIREC		£ Argisteres	Agent signature requ	and wher renstating	DATE			
TITLE	P\$		DELETE	1170	LF	ADDITIONS/CHANGES TO OFFI	JERS AND [ORECTOR Change	RS IN 12 Add-tion	96
NAME	MARTIN, DAVID			1.2 NA	ME		L			. 6
STREET ADDRESS	10930 NW 26 P	L		1357	REET ADDRESS					CR2E034 (3/96)
CITY-ST-ZIP TITLE	Sunrise FL D		DELETE		Y-ST-ZIP					
NAME	GIST, DON		Land Occerts	2 1 Tiř 2 2 NA			L.	Change	Addition) 0
STREET ADDRESS	19732 NW 5TH	PL			REET ADDRESS					
CITY - ST - ZIP	MIAMI FL				TY - ST - ZIP					
TITLE NAME			DELETE	3 1 TI1	.E			Change	Addition	-
STREET ADDRESS				3 2 NA						
CITY-ST-ZIP					FET ADDRESS					
TITLE		1917	DELETE	411/	Y-SI-ZIP .E			Change	Additoo	_
NAME				4 2 NA	l l			Change		
STREET ADDRESS				43516	EET AODRESS					
CITY-ST-ZIP TITLE			Dr. Fre		r-St-ZiP					
NAME			DELETE	5 1 TIT				Change	Addition	7
STREET ADDRESS				5 2 NA/						ĺ
CHTY-ST-ZIP					EET ADDRESS '+ST+ZIP					
TITLE			DELETE	6 1 7:11				Change	Add-tion	-
NAME				6.2 NAM				analys [J Made High	
STREET ADDRESS				6.3.516	FE LADORESS					

63 STREET ADDRESS

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 1 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 that my name appears in Block 12 or Block 13 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13 STREET ADDRESS

64 CITY-ST-ZIP

65 STREET ADDRESS

64 CITY-ST-ZIP

64 CITY-ST-ZIP

65 STREET ADDRESS

65 STREET ADDRESS

64 CITY-ST-ZIP

65 STREET ADDRESS

64 CITY-ST-ZIP

65 STREET ADDRESS

65 STREET A