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

NAME

STREET ADDRESS

SIGNATURE:

FILED Apr 29 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 DIVISION OF CORPORATIONS P93000070135 (7) DOCUMENT # TOTAL SECURITY CORPORATION Principal Place of Business Mailing Address 13261 NW 7 AVE P.O. BOX 681465 MIAM! FL 33168 MIAMI FL 33168 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/08/1993 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 26 65-0449950 Not Applicable Suite Act # etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 23 28 Zip Zip Country Country This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes Yes ☐ No 24 30 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name ajayi. J**oshua** s 4JAY1 1810 NW 119TH ST #222 Street Address (P.O. Box Number is Not Acceptable 82 **MIAMI FL 33167** 83 85 Zip Code 33/67 City M I Ami 84 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. of register diagonal and title if applicable DEFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 1.1 TITLE ☐ Change ☐ Addition ajayi, Joshua S NAME 2030 NW 119TH ST #1203 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33167** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE AJAYI, WILLIAMS R NAME 2.2 NAME 1810 NW 119TH ST #222 STREET ADDRESS 2.3 STREET ADDRESS MIAMI FL 33167 CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE Change Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - ZW 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 51 TITLE 52 NAME NAME STREET ADDRESS **5.3 STREET ADDRESS** CFTY-ST-ZW 5.4 CITY-ST-ZIP DELETE Channe Addition TITLE 61 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 14. Thereby 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 eath; that I am an officer or director of the corporation or the receiper or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

2/12/98

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