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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATI

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000072747 (7)

GETZSECURE, INC.

FILED May 12 1997 8:00am Secretary of State

]			
Principal Place of Business	Mailing Address				OEDIII BANU HOBID	ODDIA SERIA DISE	[]] [] []] []
5462 HOFFNER AVE. BUITE 506 ORLANDO FL 32812	P.O. BOX 720369 ORLANDO FL 32872-0369						
CHEMINO TE GEOIZ				3. Date Incorporated or Qualifit 10/20/1993		ate of Last F 23/1996	Report
2. Principal Place of Business	2a. Mailing Address			4. FEI Number			pplied For
21 270 9 PASEO STRE	Suite, Apt #, etc.			59-3207267			lot Applicable
22	27			5. Certificate of Status Desired			Additional Required
City & State	City & State			6. Election Campaign Financin			May Be
23 ORLANDO, FL.	28			Trust Fund Contribution	<u> </u>		to Fees
Zip 2805 25 Country 25 USA	7ip 29	Oountry 30		 This corporation has liability Florida Statutes 	🔀 Yes [□ No	s. 199.032,
9. Name and Address of Curren	nt Registered Agent			10. Name and Address of Nev	v Registered	Agent	
GETZ, RONALD D		81	Namo G1	ETZ, RONAL	D D.		
7726 PINE HOLLOW COURT		82	Street Add	ress (P.O. Gox Number is Not Acce	ptable)		
ORLANDO FL 32822		83	2/0	I PHOLO AIR	LEI		

•		84	City	LANDO	FL	85 Zip	Code 805
11. Pursuant to the provisions of Sections 607.050 office or registered agent, or both, in the State	02 and 607.1508, Florida Statu	ites, the above	named corp	poration submits this statement for t		f changing	its registered
office or registered agent, or both, in the State agent. I am familiar with, and account the oblig	el Florida. Such change was Ations of Section 607.0505, Fl	authorized by lorida Statutes	the corpora	ition's board of directors. I hereby a	ccept the app	pointment as	s registered
CHANGE Thomald W. H.	A DONALD	0, 61		PRES.	4/2	29/9	7
Signature, typed or printed name of registered age	oreand title it applicable. (NOI	16: Registered Agen	t signature requi	ired when reinstating)	DATE		
12. OFFICERS AN	ID DIRECTORS	13.	T 15	ADDITIONS/CHANGES TO O	FFICERS AND	Change	RS IN 12
NAME GETZ, RONALD D	□ bttt://	1.2 NAME	7	TO RONALD	Ó.	PS Officings	FT Vancou
STREET ADDRESS 7728 PINE HOLLOW COURT		1.3 STREET	ADORESS S	RESIDENT DEREC ETZ, RONALD I 709 PASEO STRE	ET		
CITY-ST-ZIP ORLANDO FL 32822		1.4 CITY - ST		ORLANDO FL	32805		
TITLE	DELF1E	2.17111.1				Change	Addition
NAME		2.2 NAME					
STREET ADDRESS		2.3 STREET	ADDRESS .				
CITY-ST-ZIP		2. 4 CITY - S	I - ZIP				
TITLE	☐ DELETE	3.11111.6				Change	Addition
NAME		3.2 NAME	}		•		
STREET ADDRESS	•	3 3 STREET /	1				
CITY-ST-ZIP	Plane.	3.4. CITY - S	1 - ZIP			1 10	4 4 200
TITLE	[_] DELETE	4.1 TILE				Change	Addition
NAME		4. 2 NAME	I DESCRIPTION OF THE PROPERTY				
STREET ADDRESS		4.3 STREET /	1				
CITY-ST-ZIP TOTLE	DELETE	4.4 ÇITY-ST 5.1 TITLE	- 111			Change	☐ Addition
NAME		5.2 NAME					
STREET ADDRESS		5.3 \$TREE1 /	ADDRESS				
CITY-ST-ZIP		5.4 CITY-S1	- 1				
TITLE	☐ DELE16	61 TITLE	-:			Change	Addition
NAME		6.2 NAME	}			-	
STREET ADDRESS		G.3 STREET A	ADDRESS				
CITY-ST-ZIP		6.4 CITY - ST					
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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 indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal offect 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.

CIGNATURE.

QUAL VOTILIZANO

PONALO D. GETZ

4/29/9

402 272-287