

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

**FILED**  
**Mar 25 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # P93000073466 (3)**  
 1. Corporation Name  
**BOCA ELECTRONIC SAFES, INC.**



Principal Place of Business C/O GEO SOLAR PLAZA 3401 NORTH FEDERAL HWY #108 BOCA RATON FL 33431 US	Mailing Address C/O GEO SOLAR PLAZA 3401 NORTH FEDERAL HWY #108 BOCA RATON FL 33431 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <b>6966 Calle del Paz S</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>7040 W Palmetto Pk RD #4</b> Suite, Apt. #, etc. 27 <b>Suite 122</b>
23 <b>BOCA RATON FL.</b> City & State Zip <b>33433</b>	28 <b>BOCA RATON FL</b> City & State Zip <b>33433</b> Country <b>PALM BEACH</b>

3. Date Incorporated or Qualified <b>10/22/1993</b>	4. FEI Number <b>65-0445632</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

9. Name and Address of Current Registered Agent  
**SYDENHAM, GLADYS**  
**5260 NW 2ND AVE.**  
**APT 302**  
**BOCA RATON FL 33487**

10. Name and Address of New Registered Agent  
 81 Name **SYDENHAM GLADYS**  
 82 Street Address (P.O. Box Number is Not Acceptable)  
**6966 Calle del Paz S**  
 83  
 84 City **BOCA RATON** FL 85 Zip Code **33433**

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 *Gladys Sydenham* **GLADYS SYDENHAM President** 3/17/98  
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent's signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	<b>D</b> <input type="checkbox"/> DELETE
NAME	<b>SYDENHAM, GLADYS</b>
STREET ADDRESS	<b>5260 NW 2ND AVE #302</b>
CITY-ST-ZIP	<b>BOCA RATON FL</b>
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<b>D</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	<b>SYDENHAM GLADYS</b>
1.3 STREET ADDRESS	<b>6966 Calle del Paz S</b>
1.4 CITY-ST-ZIP	<b>BOCA RATON FL 33433</b>
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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 13 if changed, or on an attachment with an address.  
 SIGNATURE: *Gladys Sydenham* **GLADYS SYDENHAM** 3/17/98 561 3388855

CR2E034 (10/97)