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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000012413 (8)

BEST ALARM SYSTEMS, INC.

Principal Place of Business

Mailing Address

FILED May 06 1997 8:00am Secretary of State



6101 NW 40TH TERRACE VIRGINIA GARDENS FL 33186			6101 NW 40TH TERRACE VIRGINIA GARDENS FL 33166-7065							
						3. Date Incorporated or Qualified			teport	
	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Vt	plied For	
21		26 8991 Sa	4724			65-0469619		~	ot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	27 🖟			5. Certificate of Status Desired	×	\$8.75 Additional Fee Required		
City & State		City & State 28 MIAMI	28 MIAMI FC			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
Zip 24	Country 25	29 33·43	30 COU	•	oe	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No				
	9. Name and Address of Curre	ent Registered Agent				10. Name and Address of New Reg	gistered A	Agent		
PORTUONDO, JULIO E				81 Name						
	1 SW 78TH ST MI FL 33143			B2	Street Ad	fdress (P.O. Box Number is Not Acceptab	le)			
				83						
ı				84	City		FL	85 Zip	Code	
office or re	to the provisions of Sections 607.05 egistered agent, or both, in the Sta m familiar with, and accept the obli	te of Florida. Such change was	authorized	d by	the corpo	orporation submits this statement for the p ration's board of directors. I hereby accep	urpose of	changing i ointment as	ts registered registered	
SIGNATURE									1	
	Signature, typed or printed name of registered a			d Agen	t signatur∈ re	quired when reliestating)	DATE			
12.	PSTD OFFICERS A	ND DIRECTORS DELFIE	13. 1.1 111	, t		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	BESTARD, JOSE M				ļ.			ET outlings	L'T Vogition	
STREET ADDRESS	6101 NW 40TH TERRACE			1.2 NAME 1.3 STREET ADDRESS						
CITY-ST-ZIP	LADOUNIA CAROCHIO PI COACO			1Y - S1					1	
TITLE	V DELETE			2.1 TITLE				☐ Change	Addition	
NAME	LOPEZ, JOSE A			2.2 NAMI]	
STREET ADDRESS	5251 SW 7TH ST			23 STREET ADDRESS						
CITY-ST-ZIP	MIAMI FL			2 4 CHY-S1-ZIP						
TITLE	☐ DELETE 3							Change	Addition	
NAME			3.2 NA	AM!						
STREET ADDRESS			3.3 \$1	REE1 #	ADDRESS					
CITY-ST-ZIP				11Y - \$1	1-7IP			<u> </u>		
TITLE				4.1 TITLE				☐ Change	L_ Addition	
NAME			4. 2 N							
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE		DELETE	4.4 CI 5 1 7 II		- (117		•	Change	Addition	
NAME		Print 00111.1	5.2 NA		Ì			- Crisings	band 7 100 100 11	
STREET ADDRESS					ADDRESS	•				
CITY+ST-ZIP			5.4 (0)						ļ	
TITLE		DELETE	6.1 717					Change	Addition	
NAME			6.2 NA		į			-		
STREET ADDRESS					ADDRESS					
CITY-ST-2IP 54				IY-\$1	- ZIP					
# 0 4 4- bass	414 14 44 1 4 4 1 4 4					C. I. D. 100 440 034010) Elected Of Late				

19. Too nereby 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 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 or an attachment with an address.

CIGNATURE:

Our Willed

Mike WILL BERTAN

11.22.60

21- 276/20