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Apr 16 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000025166 (7)

1. Corporation Name

ELECTRONIC SECURITY INTERNATIONAL, INC.



Principal Place of Business

1375 NW 97 AVENUE
BAY # A7
MIAMI FL 33015
US

Mailing Address

1375 NW 97 AVENUE
BAY # A7
MIAMI FL 33172-2659
US

3. Date Incorporated or Qualified
04/01/1994

3a. Date of Last Report
06/25/1996

2. Principal Place of Business

21 8399 NW 66 St. Ste. 5

Suite, Apt. #, etc.

22 Miami, FL

City & State

23 33166

Zip

Country

24

2a. Mailing Address

26 8399 NW 66 St. Ste. 5

Suite, Apt. #, etc.

27 Miami, FL

City & State

28 33166

Zip

Country

24

25

29

30

4. FEI Number

65-0489001

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

BARRETO, HERNANDO
6629 NW 177 TERRACE
MIAMI FL 33015

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature of agent for printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE S
NAME ORTIZ, FRANCIA
STREET ADDRESS 122 SW KINGSGATE
CITY- ST- ZIP LAKE OSWEGO OR 97035

TITLE P
NAME BARRETO, HERNANDO
STREET ADDRESS 2645 NE 164ST
CITY- ST- ZIP MIAMI FL 33180

TITLE M
NAME CASTANEDA, RENE
STREET ADDRESS 15340 SW 106 TERR #824
CITY- ST- ZIP MIAMI FL 33198

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY- ST- ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY- ST- ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY- ST- ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY- ST- ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY- ST- ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY- ST- ZIP

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 included 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: X

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

X 04/07/97

X/305/513-9515

CR2E034 (9/96)