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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9400052325

1. Corporation Name

DIRECT SECURITY, INC.

Principal Place of Business

Mailing Address

FILED May 10, 1999 8:00 am Secretary of State

05-10-1999 90259 018 ***150.00



1421 N.W. 13TH PLACE FORT LAUDERDALE FL 33311		1421 N.W. 13TH PLACE FORT LAUDERDALE FL 33311				DO NOT WRITE IN THIS SPACE				
					Ī		Date Incorporated or Qualifed			
2. Principal Pla	ace of Business	2a. Mailing Address				4.	07/11/1994 FEI Number 65-0530412		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.				Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State				6.	Election Campaign Financing Trust Fund Contribution		.00 May Be Ided to Fees	
Zip 24	Country 25	Zip 30	Country	′			This corporation owes the current year I Personal Property Tax.	☐ Yes		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
LEE, SEAN 1421 N.W. 13TH PLACE				82 Street Address (P.O. Box Number is Not Acceptable)						
FORT	LAUDERDALE FL 33311		83							
			84	Cit	y		F	L 85	Zip Code	
office or re	gistered agent, or both, in the Sta	502 and 607.1508, Florida Statutes, th ite of Florida. Such change was author igations of, Section 607.0505, Florida S	zed by	the c	med corpora corporation's	ation s bo	n submits this statement for the purpose pard of directors. I hereby accept the app	of changir ointment	ng its registered as registered	

agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.									
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12						
TITLE	PTD DELETE	1.1 TITLE	Change Addition						
NAME	LEE, SEAN	1.2 NAME							
STREET ADDRESS	1421 N.W. 13TH PLACE	1.3 STREET ADDRESS	3						
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	1.4 CITY-ST-ZIP							
TITLE	VS DELETE	2.1 TITLE	☐ Change ☐ Addition						
NAME	LEE, DIANE	2.2 NAME							
STREET ADDRESS	1421 N.W. 13TH PLACE	2.3 STREET ADDRESS							
CITY-ST-ZIP	FORT LAUDERDALE FL 33311	2. 4 CITY-ST-ZIP							
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition						
NAME		3.2 NAME							
STREET ADDRESS		3.3 STREET ADDRESS							
CITY-ST-ZIP		3.4. CITY-ST-ZIP							
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition						
NAME		4. 2 NAME							
STREET ADDRESS		. 4 3 STREET ADDRESS	3						
CITY-ST-ZIP		4.4 CITY-ST-ZIP							
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition						
NAME (5.2 NAME							
STREET ADDRESS		5.3 STREET ADDRESS	S						
CITY-ST-ZIP		5.4 CITY-ST-ZIP							
TITLE	☐ DELETE	6.1 TIπLE	☐ Change ☐ Addition						
NAME		6.2 NAME							
STREET ADDRESS		6.3 STREET ADDRESS	5						
CITY-ST-ZIP		6.4 CITY-ST-ZIP							

14. I hereby certify that the information supplied with this filling 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, with all other like empowered.

SIGNATURE: