FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION ANNUAL REPORT



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

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DOCL	JME	ΞΝ	T #	

1. Corporation Name

P94000077315 (7)

RAMOS FLORIDA SECURITY, INC.

Principal Place o	of Business	Maling Addres	S				80(4) 884)! IBB(1 0	140 14101 11001 0 664 1001
3142 SOUTH WEST 18TH STREET MIAMI FL 33145			3142 SOUTH WEST 18TH STREET MIAMI FL 33145					
						3. Date incorporated or Qualified 10/19/1994	3a. Date of L 03/24	ast Report 1/1995
2. Principal Plac	ce of Business	2a. Muiling Add	fress			4. FEI Number		Applied For
21		26				65-0544890		Not Applicable
Suite, Apt. #,	etc.	Suite, Apt	#, etc.			5. Certificate of Status Desired		8.75 Additional Fee Required
22 27 27 City & State			Cry & State		6. Election Campaign Financing		55.00 May Be	
23		28	a y a criste		Trust Fund Contribution	1 1	Added to Fees	
Zφ	Country	Zψ		Country		8. This corporation has liability for it		
24	25	29	30			Florida Statutes	No	
	9. Name and Address of Curr	ent Registered Agen	t	1		10. Name and Address of New R	egistered Ager	1t
				81	Name			
RAMOS,	JESUS			82	Street Addr	ess (P.O. Box Number is Not Acceptab	e)	
3142-00	- SSI46 /M/AM/	30/11 51	W/48PC	83				
MAMIFI	-00146 MILAMI	FL 230	3,3	63				
	•		•	84	City		FL 85	Zip Code
11 Purcusat to	The provisions of Soctions 607 05.	22 sad 607 1508. Flor	ida Stabiles, the si	Liona r	named come	ration submits this statement for the pur		a its registered office
or registure	d agent, or both, in the State of Fla	irida. Such et ange wa	is authorized by the	e corp	oration's boa	rd of directors. Thereby accept the appo	pose of changin pintment as regis	stered agent. Lam
familiar with	n, and accept the obligations of, Sc	ction 607.0505, Florid	a Statutes					
SIGNATURE _		In tanafilte at appropriation	the distance	r., · A. p. j	d separative respect	ന് ക് പ്രക്ഷേദ് സ്വ	DATE	
12.		ND DIRECTORS	1:			ADDITIONS/CHANGES TO OFF	CERS AND DIR	ECTORS IN 12
TITLE	D	D	ELETÉ 1	1 TITLE			☐ Cr	nange 🔲 Addition
NAME	RAMOS, JESUS		12	NAME:				
STREET ADDRESS	3142 SOUTH WEST 18TH	STREET	1.3	STAEET	ADDRESS			
CITY-ST-ZIP	MIAMI FL 33145		1.4	4 CHY+S	ST - 2IP			
TITLE		D	ELETE 2	1 TIT.E			□ Ct	nange 🔲 Addition
NAME			2 3	PNAME				
STREET ADDRESS			2.3	3 5 ! KEE !	ADORESS			
CITY-ST ZIP				4 Cilly - 5	ST - ZIP			
TITLE				1 TITLE			Cr	nange 🔲 Addition
NAME				2 NAME				
STREET ADDRESS					LADDRESS			
CITY - ST - ZIP			FIE 16 3.	4 C-1Y - S 1 11' LE	51 - 7iP			nange Addition
TITLE				2 NAME				mide Thuqquien
NAME PERSONAL ADDRESS		·	i		LADORESS			
STREET ADDRESS CITY-ST-ZIP				a Siree 4 Chiy - 3		40000180		
TITLE		[7 D		1 III.E	e i - 2.11	-05/03/96010	1040210	hange Addition
NAME				2 NAME		***200.00	_ -	•
STREET ADDRESS					T ADDRESS			
CITY-ST-ZIP			5	4 CHY - 5	S1 - 2(P			
TITLE			ELETE 6	TILE			C	nange 🔲 Addition
NAME			ő	2 NAME				
STREET ADDRESS			6	3 STREE	LADORESS			
CITY ST-ZIP			· · · · · · · · · · · · · · · · · · ·	4 CITY -				· · · · · · · · · · · · · · · · · · ·
certify that	the information indicated on this as	mual report c. suppler coration or the receive	nental annual repo er or trustee enipor	ort is tr	ue and accur	for the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chopter 607, FI	same legal effe	ct as if made under

SINATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR SIGNATURE: A

A COMPLEMENT FOR CORRESPONDED MARKET BARRET BARRET BARRET FOR A COMPANY DE LA COMPANY DE LA COMPANY DE LA COMP

4 4-26-96 4305.1483956 &