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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

FILED

Apr 17 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000085785 (1)

J & B SECURITY ASSOCIATES, INC.

Principal Plac	e of Business	Mailing Address	Mailing Address		a Labriddia tsa shiri deate edeli abilis dates dates ididi dirili rooms ididi dise ididi
11213 ELMHURST DRIVE PINELLAS PARK FL 34666		11213 ELMHURST DRI VE PINELLAS PARK FL 34 666			DO NOT WRITE IN THIS SPACE
					3. Date Incorporated or Qualified
					01/02/1995
2. Principal P	Place of Business	2a. Mailing Address			4. FEI Number Applied For
21		26			59-3289103 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			S8 75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & Stat	6	City & State			6. Election Campaign Financing \$5.00 May Be
23		28			Trust Fund Contribution Added to Fees
Zip	Country	Zip 20 43	Country	′	8. This corporation owes or has paid the current year Intangible
24 337	82 25	29 3 37 82 30	<u> </u>		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
9. Name and Address of Current Registered Agent				Nar	Name and Address of New Registered Agent
SMITH, JOAN H			81		
	213 ELMHURST DRIVE		82	Stre	Street Address (P.O. Box Number is Not Acceptable)
Pin	IELLAS PARK FL 34866		83		
				<u> </u>	
			84	City	FL 85 7 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					
10	Signature, typed or printed name of registered age OFFICERS AND		egislered Age	ant signa	signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
12.	P OFFICENS AND	DELETE	1,1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	SMITH, JOAN H.	<u></u>	1,2 NAME		Contract Contract
STREET ADDRESS	11213 ELMHURST DRIVE		1.3 STREET		DRICC .
CITY-ST-ZIP	PINELLAS PARK FL 34666		1.4 CiTY-S		i
TITLE	V	DELETE	2.1 TITLE		Change Addition
NAME	SMITH, WILLIAM E.		2,2 NAME		
STREET ADDRESS	11213 ELMHURST DRIVE		2.3 STREET A		DRESS
CITY-ST-ZIP	MUST A A DADIV EL DAGGA		2, 4 CITY - 9		
TITLE			3.1 TITLE	<u> </u>	Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS	RESS 3.3.5		3.3 STREET	ADDRE	DRESS
CITY-ST-ZIP			3.4. CITY - S	ST - ZIP	ZIP
TITLE			4.1 TITLE		☐ Change ☐ Addition
NAME			4, 2 NAME		,
STREET ADDRESS			4.3 STREET	ADDRE	DRESS
CITY-ST-ZIP			4.4 CITY - S	T-ZIP	IP
TITLE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET	ADDRE	DRESS
CITY-ST-ZIP			5.4 CITY-S	1-ZIP	
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET	ADDRE:	DRESS

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.