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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 16 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name P94000089822 (8)

SURE-LOCK INC

CITY-ST-ZIE

SIGNATURE:

Principal Place of Business Mailing Address 1100 S. FEDERAL HWY 1100 S. FEDERAL HWY SUITE 4 SUITE 4 BOYNTON BEACH FL 33435-5650 **BOYNTON BEACH FL 33435** 3. Date Incorporated or Qualified 3a. Date of Last Report 12/12/1994 05/09/1996 Applied For 2. Principal Prace of Business Mailing Address 4. FE! Number 2a. 65-0550965 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees 23 28 Trust Fund Contribution Zιο Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, X Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RUDY, RON JR 1100 S. FEDERAL HWY Street Address (P.O. Box Number is Not Acceptable) **SUITE 4** 83 **BOYNTON BEACH FL 33435** 84 Zip Code 11. Pursuant to the provisions of Sections 697.0502 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 Fiorida. 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 typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) DATE OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. 13. DELETE Change Addition TITLE 1.1 TITLE RUDY, RON JR NAME 1.2 NAME 1100 S. FEDERAL HWY, SUITE 4 1.3 STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33435** 1.4 CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition THUE 2.1 TITLE **MURPHY, THOMAS** NAME 2.2 NAME 6450 SCOTT ST 2.3 STREET ADDRESS STREET ADDRESS HOLLYWOOD FL 2 4 CITY-ST-ZIP CITY - SI - ZIF DELETE Addition Change 31 TITLE TIT_t F NAME 32 NAME **33 STREET ADDRESS** STREET ADDRESS 3.4. CITY - ST - ZIP CHY-ST-ZIF DELETE Change Addition 4.1 TITLE TITLE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY - ST - ZIP CITY-ST-7/P DELETE Change Addition 5.1 TITLE TRUE NAME 5 2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIF 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS

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 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 attention of the corporation of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name Ron Rudy Jr. 4/10/97

6.4 CITY-ST-ZIP