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

Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000013804

Principal Place of Business

WELLINGTON AND KNIGHT SECURITY, INC.

731 S.W. 25TH I MIAMI FL 33129		731 S.W. 25TH ROAD MIAMI FL 33129			DO NOT WRITE IN THIS SPACE			
			·		3. Date Incorporated or Qualifed 02/17/1995			
2 Principal Di	ace of Business	2a. Mailing Address			4. FEI Number	Appl	lied For	
Z, Pililopai rie	ace of Disamoss	26			65-0591189	Not .	Applicable_	
21	t oto	Suite, Apt. #, etc.	<del></del> -			\$8.75 Ad		
Suite, Apt. #	Ψ, etc.	27		•	5. Certifcate of Status Desired	Fee Req	uired	
22	<u> </u>	City & State			6. Election Campaign Financing	\$5.00 N	lav Be	
City & State	) · · · · · · · · · · · · · · · · · · ·	<b>—</b>			Trust Fund Contribution	Added to	,	
23		Zip	Country		8. This corporation owes the current year	r Intangible	•	
Zip			¬ - '		Personal Property Tax.			
24	[25]	29 3	0		10. Name and Address of New Register	red Agent	-	
	<ol><li>Name and Address of Cu</li></ol>		81	Name	10. Name and Address 5. 150 Jugar			
		<b>利用,1000年</b>	*'	ļ				
PINO 2440	, RAUL F CORAL WAY	SAME NO	82	Street Add	ress (P.O. Box Number is Not Acceptable)		<del></del>	
MIAN	AI FL 33145		83		· · · · · · · · · · · · · · · · · · ·	制器语語	指納區	
, , , , , , , , , , , , , , , , , , , ,						85 Zip C	ode **	
			84	,	poration submits this statement for the purposion's board of directors. I hereby accept the a	-L	l	
SIGNATURE	Signature, typed or printed name of registere				poration submits this statement for the purposion's board of directors. I hereby accept the a ed when rekristating)  ADDITIONS/CHANGES TO OFFICER:	E		
12.		T DELETE	1.1 TITLE		2001 D.N.	Change	☐ Addition	
πιε	PVSD	<u></u>	1.2 NAME		₩ * 1.314		\	
NAME	MIRANDA, MARIO		l	T ADDRESS				
STREET ADDRESS	731 S.W. 25TH ROAD							
CITY-ST-ZIP	MIAMI FL 33129	El ser ere	1.4 CITY-5	ST-ZIP		☐ Change	Addition	
TITLE		☐ DELETE	2.1 TITLE				_	
NAME			2.2 NAME		,			
STREET ADDRESS		•	2.3 STREE	ET ADDRESS	•		:	
CITY-ST-ZIP	, , , , , , , , , , , , , , , , , , , ,	Specification of the second	2. 4 CITY-	ST-ZIP		Charma	I'' Addition	
TITLE		☐ DELETE	3.1 TITLE			Change	Addition	
NAME		Mary 1	3.2 NAME		~			
STREET ADDRESS	ESSAF AVE.		3.3 STREE	ET ADDRESS	in the second section of the second section is		- Amarican	
	[13] The State of		3.4. CITY-	ST-ZIP	* * * * <u>* * * * * * * * * * * * * * * </u>	7.7	A 1921 C.M.	
CITY-ST-ZIP	<del> </del>	☐ DELETE	4.1 TITLE			Change	Addition	
TITLE			4, 2 NAME	.	•			
NAME		'9 <b>'</b>		ET ADDRESS				
STREET ADDRESS	1	.f 1	4.4 CITY-	<b>I</b>				
CITY-ST-ZIP		□ DELETE	5.1 TITLE			☐ Change	Addition	
mre		M Dereie	5.1 IIILE 5.2 NAME	<b>I</b>	· · · · ·			
NAME								
STREET ADDRESS			1	ET ADDRESS				
CITY-ST-ZIP	[19:32]		5.4 CITY-			☐ Change	Addition	
TITLE	of a property see see	☐ DELETE	6.1 TITLE			C. C. Lange		
NAME	The self-real self-real		6.2 NAME				•	
	genter of the end		6.3 STRE	ET ADDRESS				

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

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, with all other like empowered.

**FILED** 

Feb 08, 1999 8:00am

**Secretary of State** 

02-08-1999 90027 027 \*\*\*150.00