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

PROFIT
CORPORATION
ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000028180 (4)

SECURITY RESOURCE MANAGEMENT, INC.

## FILED Apr 20 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address						,	*** 66146 1461	A1 15124 11551 14	,,,,, <b>48</b> ,,,,,
611 DRUID RD 611 DRUID RD									
STE 106		STE 106			DO NOT WRITE IN THIS COLOR				
1	ER FL 34616	CLEARWATER FI	. 34616			DO NOT WRITE IN THIS SPACE			
US		US				3. Date Incorporated or Qualified			
a Dula signal	Disease of Diseases	A. Mailie e Addres				04/10/1995		<del>т-т.</del>	
	Place of Business	<b>2a.</b> Mailing Addro	:SS			4, FEI Number		<del></del>	pplied For
21		26				59-3313554			ot Applicable
Suite, Ap	l. #, <b>В</b> IС.		Suite, Apt #, etc.			5. Certificate of Status Desired			Additional
22		27 Crt. 9 Crt.							lequired
City & Sta	gie	City & State	<u>├</u> ¬ ′			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
23									
Zip	Country	<del>}</del> —¬	├─┐ ` <b>├─┐</b>			8, This corporation owes or has paid the current year Intan			
24 25 25 Q. Name and Address of Curr		· · · · · · · · · · · · · · · · · · ·	29 30 30			Personal Property Tax due June 30. X Yes No  10. Name and Address of New Registered Agent			
<u> </u>	- <del> </del>	Current Hedisteren Adent		81	Name	10. Hame and Address of New Ad	Signatured	Agent	<del></del>
	TAACK, JAMES A			اتا	Name				
	00 Cleveland Street Su	ITE 760		82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
C	LEARWATER FL 34615				·				
				83					
				84	City			<b>85</b> Zip	Code
					J.,		FL	.   "   - "	2000
office or	registered agent, or both, in the am familiar with, and accept the	<ul> <li>State of Florida, Such change</li> </ul>	e was authorize	d by	the corporation	oration submits this statement for the pon's board of directors. I hereby accept	ourpose of of the app	f changing i pointment as	ts registered registered
	Signature, typed or printed name of regist			d Age	nt signature required	··· · · · · · · · · ·	DATE		
12.	OFFICE	RS AND DIRICTORS	13.		<del> </del>	ADDITIONS/CHANGES TO OFFIC	ERS AND		
TITLE	P	☐ DEL	.ETE 1.1 TI	ITLE				L Change	Addition
NAME	PREWETT, LUCAS	_	12 N	AME					
STREET ADDRESS		6	1.3 S <sup>1</sup>	TREET	ADDRESS				
CITY-ST-ZIP	CLEARWATER FL			ITY - S1	T-21P				
TITLE		DEI	.ETE 2.1 TI	TLE				Change	Addition
NAME	1		2.2 N	ame					
STREET ADDRESS	; [		2.3 S	TREET.	ADDRESS				
CITY-ST-ZIP			2.40	HY-S	ST - ZIP				
TITLE		DEI	.ETE 3.1 Th	TLE				Change	Addition
NAME			3.2 N	AME					
STREET ADDRESS	: ]		3.3 S	IREET.	ADDRESS				
CITY-ST-ZIP	}		3.4 C	IIY-S	i7 - ZIP				
TITLE	DELETE 4.1		.ETE 4.1 TI	4.1 TITLE				Change	Addition
NAME			4.2 N	IAME	1				
STREET ADDRESS			43.51	TAFFT.	ADDRESS				
CITY-ST-ZIP			a t	ITY-S1					
TITLE	<del></del>	DEL			1.51			Change	Addition
NAME		<u></u>	5.2 N/						
	.1				1000000				
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	<u> </u>	DEL		TY-SI	I · LIP			Chanca	Addition
TITLE		☐ <i>U</i> EL						☐ Change	Addition
NAME			6.2 NA						
STREET ADDRESS	:1		6.3 \$1	TREET A	ADDRESS				

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 report 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 addition.

4/13/98

813-446-4988