

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

FILED

98 MAY 29 AM 8:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/27/1995	
4. FEI Number 65-0579097	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	
JESUS GONZALEZ 14920 S.W. 145 ST MIAMI, FL. 33196	
10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83 City	
84 State	

PROFIT CORPORATION
ANNUAL REPORT
1998
FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000031002

1. Corporation Name

ALARM SUPPLY INC.

Principal Place of Business
2786 N.W. 79TH AV.
MIAMI, FL. 33122

Mailing Address
2786 NW 79TH AVENUE
MIAMI, FL 33122

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country

8. Name and Address of Current Registered Agent	
JESUS GONZALEZ 14920 S.W. 145 ST MIAMI, FL. 33196	

11. Pursuant to the provisions of Sections 807.0502 and 807.1508, 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 807.0505, Florida Statutes.	
SIGNATURE	DATE
Signature typed or printed name of registered agent and date if applicable	(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PRESIDENT ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GONZALEZ, JESUS	1.2 NAME	
STREET ADDRESS	14920 SW 145TH STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33196 ☐ DELETE	1.4 CITY - ST - ZIP	
TITLE	SECRETARY AND TREASURER ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	PEREZ, AUGUSTO	2.2 NAME	
STREET ADDRESS	2786 NW 79TH AVE	2.3 STREET ADDRESS	
CITY - ST - ZIP	MIAMI FL 33122 ☐ DELETE	2.4 CITY - ST - ZIP	
TITLE	☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY - ST - ZIP		3.4 CITY - ST - ZIP	
TITLE	☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY - ST - ZIP		5.4 CITY - ST - ZIP	
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 110.07(3)(D), 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 807, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* 05/19/1998 (305) 594-2075

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #