

P95000046460

Riley & McKinnis PA  
(Requestor's Name)

505 W. Cypress St #111  
(Address)

Tampa, FL  
(City, State, Zip)

(Phone #)

33607-1772

OFFICE USE ONLY

SECRET  
JUN 12 1995  
TALLAHASSEE  
FLORIDA

**CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):**

1. \_\_\_\_\_ 500001511685  
(Corporation Name) (Document #) -06/13/95--01043--007  
\*\*\*245.00 \*\*\*122.50
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #)
4. \_\_\_\_\_  
(Corporation Name) (Document #)

☐ Walk in ☐ Pick up time \_\_\_\_\_

☐ Certified Copy

☐ Mail out ☐ Will wait ☐ Photocopy

☐ Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials

**ARTICLES OF INCORPORATION  
OF  
A.S.T. PROTECTIVE SERVICES CORP.**

RECEIVED  
JUN 12 AM 9:10  
TALLAHASSEE, FLORIDA

**ARTICLE I. NAME**

The name of this corporation shall be A.S.T. Protective Services Corp.

**ARTICLE II. COMMENCEMENT & DURATION**

The commencement of this corporation's existence shall be at the time of the filing of these Articles Of Incorporation by the Florida Department of State. This corporation's duration shall be perpetual.

**ARTICLE III. PURPOSE**

This corporation is being organized for the purpose of sales, service, security services engaging in the transaction of any and all business activities permitted under the laws of Florida and the United States Of America.

**ARTICLE IV. CAPITAL STOCK**

This corporation shall have the authority to issue 1,000 no par value shares of common capital stock.

**ARTICLE V. PREEMPTIVE RIGHTS**

Every shareholder, upon the sale for cash by this corporation of any shares of new capital stock of the same kind, class, or series, as that which the shareholder already holds, shall have the preemptive right to purchase a pro rata share thereof (as nearly as may be done without the issuance of fractional shares) at the price at which such shares are offered to others.

**ARTICLE VI. TRANSFER RESTRICTIONS**

No shareholder shall have the right to sell, assign, pledge, encumber, transfer, or otherwise dispose of any shares of the capital stock of this corporation, without first offering

such shares for sale to this corporation at the net asset value thereof. Such offer shall be in writing, signed by the shareholder, sent by registered or certified mail to this corporation at its registered office address, and open for acceptance by this corporation for a period of fifteen days from the date of mailing. If this corporation fails or refuses, within such period, to make satisfactory arrangements for the purchase of such shares, the shareholder shall have the right to dispose of such shares without any further restrictions.

On the death of any shareholder, this corporation shall have the right to purchase any shares of the capital stock of this corporation owned by the shareholder immediately prior to the shareholder's death, on the terms set forth above, and this provision shall be binding upon the personal representative of the shareholder.

Each stock certificate issued by this corporation shall carry the following legend:

"These Shares Are Held Subject To Certain Transfer Restrictions  
Imposed By This Corporation's Articles Of Incorporation, A Copy  
Of Which Is On File At This Corporation's Principal Office."

#### **ARTICLE VII. INITIAL BOARD OF DIRECTORS**

The number of directors on this corporation's Initial Board Of Directors shall be one. The number of directors may be increased or decreased from time to time, as provided in this corporation's bylaws, but shall never be less than one.

The name and address of each individual who shall serve as a member of the Initial Board Of Directors are:

Gonzalo Valdes  
8607 Brookway Circle  
Tampa, FL 33635

#### **ARTICLE VIII. INDEMNIFICATION**

This corporation shall indemnify any officer, director, employee, or agent, and any former officer, director, employee, or agent, to the full extent permitted by law.

**ARTICLE IX. PRINCIPAL OFFICE & INITIAL REGISTERED OFFICE & AGENT**

The address of this corporation's principal office and the address of this corporation's initial registered office shall be:

8310 N. Thatcher Avenue  
Tampa, FL 33614

The name of the individual who shall serve as this corporation's initial registered agent and his address are:

Steven P. Riley, Esquire  
5405 W. Cypress St. #111  
Tampa, FL 33607-1772

FILED  
JUN 12 11 5:10  
TAMPA  
FLORIDA

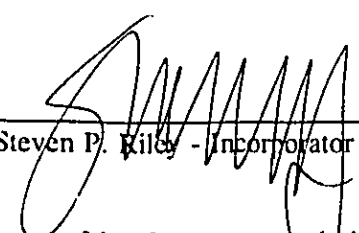
**ARTICLE X. INCORPORATOR**

The name and address of the individual who shall serve as this corporation's incorporator are:

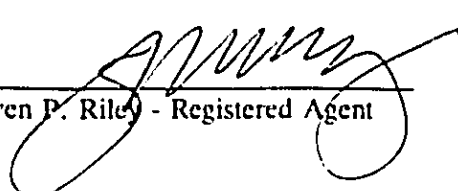
Steven P. Riley, Esquire  
5405 W. Cypress St. #111  
Tampa, FL 33607-1772

**ARTICLE XI. AMENDMENT**

This corporation reserves the right to amend or repeal any provisions in these Articles Of Incorporation, or any amendments hereto. Any rights conferred upon the shareholders shall be subject to this reservation.

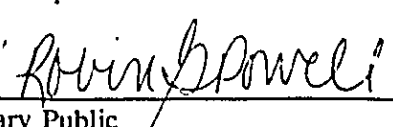
  
\_\_\_\_\_  
Steven P. Riley - Incorporator

I hereby accept my designation as resident agent and agree to serve as the resident agent of A.S.T. Protective Services Corp. I hereby state that I am familiar with and accept the duties and responsibilities as registered agent for A.S.T. Protective Services Corp.

  
Steven P. Riley - Registered Agent

State Of Florida  
County Of Hillsborough

On JUNE 9, 1995, Steven P. Riley, designated above as the individual who shall serve as the corporation's initial registered agent and incorporator, who is personally known to me, or produced a Florida driver's license as identification, personally appeared before me at the time of notarization, and, after being given the oath, acknowledged signing these Articles Of Incorporation Of A.S.T. Protective Services Corp.

  
Notary Public



ROBIN G. POWELL  
My Commission GC463502  
Expires Jun 22, 1999  
Bonded by HAI  
800-422-1555

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.  
AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

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DOCUMENT # P95000046460 (8)

A.S.T. PROTECTIVE SERVICES CORP.



Principal Place of Business: 8310 NO. THATCHER AVENUE  
TAMPA FL 33614  
Mailing Address: 8310 NO. THATCHER AVENUE  
TAMPA FL 33614

3. Date incorporated or Qualified	06/12/1995	3a. Date of Last Report	N/A
4. FEI Number	59-3382444	Applied For	Not Applicable
5. Certificate of Status Desired	<input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
8. Name and Address of New Registered Agent			

2. Principal Place of Business	2a. Mailing Address
21. 4236 W. WATERS AVE.	26. 4236 W. WATERS AVE.
22. Suite B	27. Suite B
23. Tampa FL	28. Tampa FL
24. 33614	29. 33614
25. U.S.	30. U.S.

9. Name and Address of Current Registered Agent  
RILEY, STEVEN P. ESQ.  
5405 W. CYPRESS ST. STE 111- 3333 HENDERSON  
TAMPA FL 33607-1772- BLVD. #150  
33609-2938

81. Name	
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL
85. Zip 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: *[Signature]* DATE: Aug 29, 1996

12. OFFICERS AND DIRECTORS	
TITLE	D
NAME	VALDES, GONZALO
STREET ADDRESS	8607 BROOKWAY CIRCLE
CITY, ST, ZIP	TAMPA FL 33634
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN: 12	
11. TITLE	
12. NAME	
13. STREET ADDRESS	
14. CITY, ST, ZIP	
21. TITLE	
22. NAME	
23. STREET ADDRESS	
24. CITY, ST, ZIP	
31. TITLE	
32. NAME	
33. STREET ADDRESS	
34. CITY, ST, ZIP	
41. TITLE	
42. NAME	
43. STREET ADDRESS	
44. CITY, ST, ZIP	
51. TITLE	
52. NAME	
53. STREET ADDRESS	
54. CITY, ST, ZIP	
61. TITLE	
62. NAME	
63. STREET ADDRESS	
64. CITY, ST, ZIP	

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\*\*\*\*375.00 \*\*\*\*375.00

REINSTATEMENT

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

8/29/96 (813) 588-6683

CR2E034 (396)