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

PROFIT CORPORATION ANNUAL REPORT

Principal Place of Business

12841 SW 88 STREET MIAMI FL 33142



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 17 1997 8:00am

Secretary of State

3a. Date of Last Report 04/12/1996

3. Date Incorporated or Qualified

08/01/1995

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## 1997

DOCUMENT # P95000059275 (4)

Mailing Address
12841 SW 88 STREET

MIAMI FL 33186-1707

SOUTH FLORIDA LOCKSMITH OF KENDALL, INC.

2. Principal Place of Business Mailing Address 4. FEI Number Applied For 65-0604756 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees 28  $Z_{\rm ID}$ Country Country This corporation has liability for Intangible tax under s. 199.032, 24 25 29 30 Florida Statutes ☑ Yes □ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name CAJIGAS, JOSE L 1782 SW 1 STREET Street Address (P.O. Box Number is Not Acceptable) 82 MIAMI FL 33135 83 City 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. Lam lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signarias hypico or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 96/6) (96/6) 12 13. PSTD DELETE Change Addition 1.1 TITLE TIT. F ÇAJIGAS, LAZARA 12 NAME NAME 100 W FLAGLER ST M#1310 1.3 STREET ADDRESS STREET ADDRESS MIÁMI FL 33174 1.4 CITY-ST-ZIP CITY-ST-ZIP □ DELETE Change Addition TITLE 2.1 TITLE ÇAJIGAS, JOSE N 2.2 NAME NAME 1001 W FLAGLER ST M#1310 2.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33174 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 3 1 TITLE TITLE NAVE 3.2 NAME STREET ADDRESS 3 3 STREET ADDRESS 34. CITY-ST-ZIP CITY-ST-ZIF DELETE Change Addition 4.1 TITLE Title 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST-ZIP DELETE Change Addition 5.1 TITLE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP DITY-ST-ZIP DELETE Addition 6.1 TITLE TITLE 6.2 NAME NAVE 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY - ST - ZIP CITY - ST - ZIF 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

t 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.