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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # **P95000066817** 1. Corporation Name

PRO-TECH LOCK & SAFE, INC.

## **FILED** Feb 23, 1999 8:00 am Secretary of State 02-23-1999 90092 003 \*\*\*150.00



Principal Place	of Business	Mailing Address				1				, ••				
3910 N. 56 AVE 3910 N. 56 AVE											•			
HOLLYWOOD FL 33021 HOLLYWOOD F			1				DO NOT WRITE IN THIS SPACE							
						<u> </u>	3. Date Inco				.,			_1
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2. Principal Pl		<del></del>			4. FEI Numl					TIA	pplied For	_		
2. Principal Place of Business 2a. Mailing Address 2b. 26/2 W 3 8 aw 2c 2c 26 26/8 W 5					111		65-060	7336			٠	$\rightarrow$	lot Applicat	ele
Suite, Apt. #, etc. Suite, Apt. #, etc.				38 aw					i e Danie				Additional	•
						-	5. Certifcate	or Stai	ns nesu	30 7 g . L	·	Fee F	Required	
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Zip	Country Zip			Country			8. This corp	oration	owes the	current				
4	25 29 30						Personal	<u> </u>	<del></del>			∐ Yes	□No	_
	9. Name and Address of Currer	nt Registered Agent				1	0. Name an	d Addr	ess of N	ew Regi	stered A	gent		_
DALL	DUTZ ELMOOD			81	Name							-		
BAUBLITZ, ELWOOD					Street A	Address	(P.O. Box N	umber i	s Not Ac	ceptable	<del></del>		<u>-</u>	
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11. Pursuant	to the provisions of Sections 607,050 egistered agent, or both, in the State	)2 and 607.1508, Florida Statute of Florida, Such change was at	s, the ab thorized	bove- i bv ti	named o he como	corporat oration's	ion submits. board of dire	this stat ectors.	ement to hereby a	r-the-pur accept th	pose₊ot⊦c e appoint	nanging:i ment as i	is:registere registered	
agent. I a	m familiar with, and accept the obliga	ations of, Section 607.0505, Flor	ida Statu	utes.	•				•					- }
SIGNATURE											DATE			_ ا
	Signature, typed or printed name of registered age	ent and title if applicable (NOTE: ND DIRECTORS	Registered 13.	Agent :	signature re	required whe	an reinstating)	S/CHA	NGES TO		_	DIRECT	ORS IN 12	tion {
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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 one an attachment with an address, with all other like empowered.

SIGNATURE: