

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # P95000067050 (1)

1. Corporation Name

JAMES SECURITY, INC.



Principal Place of Business

638 N.W. 65TH ST.
#3
MIAMI FL 33150

Mailing Address

638 N.W. 65TH ST.
#3
MIAMI FL 33150

2. Principal Place of Business

21 149 W PLAZA
Suite, Apt. #, etc.

22 202

23 Miami Florida
City & State

24 33147
Zip

Country

2a. Mailing Address

26 P.O. Box 470814
Suite, Apt. #, etc.

27

28 Miami Florida
City & State

29 33247
Zip

Country

3. Date Incorporated or Qualified
08/25/1995

3a. Date of Last Report

4. FEI Number

65-0604977

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 has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

REDDING, JOANNE
638 N.W. 65TH ST.
#3
MIAMI FL 33150

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

Joanne Redding

(Signature of Agent/Registered Agent)

3/21/94

DATE

12. OFFICERS AND DIRECTORS

TITLE PVST
NAME REDDING, JOANNA
STREET ADDRESS % 638 N.W. 65TH ST.
CITY-ST-ZIP MIAMI FL 33150

TITLE D
NAME REDDING, JOANNA
STREET ADDRESS % 638 N.W. 65TH ST.
CITY-ST-ZIP MIAMI FL 33150

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

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-05/20/96--01056--038

***200.00

☐ Change ☐ Addition

25.1

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joanne Redding

(Signature and Typed or Printed Name of Signing Officer or Director)

3/21/94

DATE

CR2E034 (12/95)