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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000070659 (4)

ALARM SCREENS, INC.

FILED May 02 1997 8:00am Secretary of State



Principal Plac	e of Business	Mi	ailing Address				<u> </u>	B HAD WED AUGUS AUGUS	DDING BIND OI	IND ORDER FORDE
712 NW 57 ST	TREET	PC	OST OFFICE BOX							
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SIGNATURE.	Signature, typed or printed name of	registered agent and the	if applicable	(NOTE: Registers		equired when reinstaling)		DATE		
SIGNATURE	Signature, typed or printed name of OFF		if applicable CTORS	(NOTE: Registere		equired when reinstaling)	CHANGES TO OFF	DATE		
SIGNATURE.	Signature, typed or printed name of OFF	registered agent and the ICERS AND DIREC	if applicable	(NOTE: Registere	ed Agent signature re	equired when reinstaling)		DATE	DIRECTO Change	
SIGNATURE. 12. IIILE	Signature, typical or printed name of OFF PD BERNSTEIN, DONAL	registered agent and the ICERS AND DIREC	if applicable CTORS	(NOTE: Registere	ad Agent signature re	equired when reinstaling)		DATE		
SIGNATURE. 12. TITLE NAME	Signature, typical or printed name of OFF PD BERNSTEIN, DONAL 712 NW 57 STREET	registered agent and the ICERS AND DIREC	if applicable CTORS	(NOTE: Registere 13. TE 1.1 T 1.2 M 1.3 S	ad Agent signature te	equired when reinstaling)		DATE		
SIGNATURE. 12. TITLE NAME STREEL ADDRESS CITY-SI-ZIP	Signature, typed or pointed name of OFF PD BERNSTEIN, DONAL 712 NW 57 STREET FORT LAUDERDALE	registered agent and the ICERS AND DIREC	if applicable TORS DELE	(NOTE: Registere 13. TE 1.1 T 1.2 N 1.3 S 1.4 C	ed Agent signature re	equired when reinstaling)		DATE ICERS AND	☐ Change	Addition
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SIGNATURE. 12. TITLE NAME STREEL ADDRESS CITY-SI-ZIP TITLE	OFF PD BERNSTEIN, DONAL 712 NW 57 STREET FORT LAUDERDALE VD BERNSTEIN, JACKIE	registered agent and the ICERS AND DIRECT	if applicable TORS DELE	(NOTE: Registere 13. 14. 1.17 1.2 M 1.3 S 1.4 C 1/E 2.1 T 2.2 M	ITLE IAME STREET ADDRESS SITY-ST-2IP ITLE IAME	equired when reinstaling)		DATE ICERS AND	☐ Change	Addition
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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 of changed, of on an attachment with an address.

SIGNATURE: