

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. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000077951 (8)

1. Corporation Name

FIRST ALERT PROTECTIVE SERVICES, CORP.



Principal Place of Business

Mailing Address

3001 SOUTH OCEAN DR., STE. 12L
HOLLYWOOD FL 33019

3001 SOUTH OCEAN DR., STE. 12L
HOLLYWOOD FL 33019

3. Date Incorporated or Qualified
10/06/1995

3a. Date of Last Report
N/A

2. Principal Place of Business

2a. Mailing Address

21 3001 South Ocean Dr.

26 3001 South Ocean Dr.

4. FEI Number
65-0633307

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 12L

27 Suite 12L

5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required

City & State

City & State

23 Hollywood, FL.

28 Hollywood, FL.

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24 33019

25 Broward

29 33019

30 Broward

8. This corporation has liability for intangible tax under s. 199.032
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DALE, STEVE D
3001 SOUTH OCEAN DR., STE. 12L
HOLLYWOOD FL 33019

81 Name DALE, STEVE D.

82 Street Address (P.O. Box Number is Not Acceptable)
3001 South Ocean Dr.

83 Suite 12L

84 City Hollywood

FL

85 Zip Code
33019

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, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent's signature required when forming filing)

DATE

Steve D. Dale

8/6/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME DALE, STEVE D
STREET ADDRESS 3001 SOUTH OCEAN DR., STE. 3J
CITY - ST - ZIP HOLLYWOOD FL 33019

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
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CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

11 TITLE ☐ Change ☐ Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Steve D. Dale

Steve D. Dale

DATE

Daytime Phone #

954-
920-0888

8/6/96

CR2E034 (3/96)