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FILED
May 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # P95000090253 (2)

1. Corporation Name

TOTAL ENTRY CONTROL SYSTEMS, INC.

Principal Place of Business

11851 N.E. 14TH AVENUE
MIAMI FL 33161

Mailing Address

11851 N.E. 14TH AVENUE
MIAMI FL 33161



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/22/1995

4. FEI Number

65-0626403

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☒ Yes ☐ No

2. Principal Place of Business

21 16148 N.W. 22 STREET

22 Suite, Apt. #, etc.
PEMBROKE PINES, FL.

23 City & State

33028

24 Zip

25 Country

U.S.

2a. Mailing Address

26 16148 N.W. 22 STREET

27 Suite, Apt. #, etc.
PEMBROKE PINES, FL.

28 City & State

33028

29 Zip

30 Country

U.S.

9. Name and Address of Current Registered Agent

AUGULO, JORGE
11851 N.E. 14TH AVENUE
MIAMI FL 33161

10. Name and Address of New Registered Agent

81 Name

TRACY CANNON

82 Street Address (P.O. Box Number is Not Acceptable)

83

16148 N.W. 22 STREET

84

PEMBROKE PINES, FL.

FL

85 Zip Code

33028

11. Pursuant to the provisions of Sections 607.0802 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, if not applicable

(NOTE: Registered Agent signature required when registering)

Date

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
ANGULO, JORGE
STREET ADDRESS
11851 N.E. 14 AVE.
CITY-ST-ZIP
MIAMI FL 33161

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
PRES. (P)
JORGE ANGULO
16148 N.W. 22 ST.
PEMBROKE PINES, FL. 33028

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
VICE PRES. (VP)
TRACY CANNON
16148 N.W. 22 STREET.
PEMBROKE PINES, FL. 33028

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 on an attachment with an address.

SIGNATURE:

Angulo, Jorge

4/27/98

AS4 704-8009

CR2E034 (10/97)