

Amended #6/25

PROFIT CORPORATION ANNUAL REPORT 1996

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

DOCUMENT # P95000092988

1. Corporation Name
Security Solutions & Investigations, Inc.

Principal Place of Business
5120 Corvette Dr.
Tampa FL 33624

Mailing Address
5120 Corvette Dr.
Tampa FL 33624

2. Principal Place of Business

21 State: FL

22 City & State: Tampa FL

23 Zip: 33624

24 Country: USA

25

26 Mailing Address

27 State: FL

28 City & State: Tampa FL

29 Zip: 33624

30 Country: USA

3. Date Incorporated or Qualified: 12/04/95

3a. Date of Last Report: 12/04/95

4. FEI Number: 65-0640063

5. Certificate of Status Desired: ☐ Applied For ☐ Not Applicable

6. Election Campaign Financing: ☐ \$8.75 Additional Fee Required ☐ \$5.00 May Be Added to Fees

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

9. Name and Address of Current Registered Agent
Kenneth B. Provonska
5120 Corvette Dr.
Tampa FL 33624

10. Name and Address of New Registered Agent

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 607.04(1) and 607.1506, 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 duties provided in Section 607.05(3), Florida Statutes.

SIGNATURE: _____

12. OFFICERS AND DIRECTORS

12.1 NAME: Kenneth B. Provonska
12.2 STREET ADDRESS: 5120 Corvette Dr.
12.3 CITY & STATE: Tampa FL 33624

12.4 NAME: James R. Hebel
12.5 STREET ADDRESS: 1205 Timber Ct.
12.6 CITY & STATE: Tampa FL 33625

12.7 NAME: Roberta Provonska
12.8 STREET ADDRESS: 5120 Corvette Dr.
12.9 CITY & STATE: Tampa FL 33624

12.10 NAME: _____
12.11 STREET ADDRESS: _____
12.12 CITY & STATE: _____

12.13 NAME: _____
12.14 STREET ADDRESS: _____
12.15 CITY & STATE: _____

12.16 NAME: _____
12.17 STREET ADDRESS: _____
12.18 CITY & STATE: _____

12.19 NAME: _____
12.20 STREET ADDRESS: _____
12.21 CITY & STATE: _____

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13.1 NAME: _____
13.2 STREET ADDRESS: _____
13.3 CITY & STATE: _____

13.4 NAME: _____
13.5 STREET ADDRESS: _____
13.6 CITY & STATE: _____

13.7 NAME: _____
13.8 STREET ADDRESS: _____
13.9 CITY & STATE: _____

13.10 NAME: _____
13.11 STREET ADDRESS: _____
13.12 CITY & STATE: _____

13.13 NAME: _____
13.14 STREET ADDRESS: _____
13.15 CITY & STATE: _____

13.16 NAME: _____
13.17 STREET ADDRESS: _____
13.18 CITY & STATE: _____

13.19 NAME: _____
13.20 STREET ADDRESS: _____
13.21 CITY & STATE: _____

14. I, the undersigned, certify that I am a duly qualified and authorized officer or director of the corporation and that I am familiar with and accept the duties provided in Section 607.05(3), Florida Statutes.

SIGNATURE: Kenneth B. Provonska

8/1/96

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