FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandre B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000096422 (7)

SECURITY CONCEPTS OF TAMPA, INCORPORATED

FILED Mar 26 1998 8:00am Secretary of State

Principal Place of Business Mailing Address				ill doine thuid Edial Kinin tonne 1181 1881		
-C114-CRICKETHOLLOW-DR		6114 CRICKETHOLLOW DR				
RIVERVIEW FL 00309		RIVERVIEW PL 33369		DO NOT WRITE	DO NOT WRITE IN THIS SPACE	
and cinay with		P.O. BOX 9UP		3. Date Incorporated or Qualified		
Brana	lon. TI 33510	Brandon 1	P1 33509	12/18/1995		
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21 22 (Cindu Lane	26 P.O. Box	104	59-3354972	Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	ndon, FL	City & State 28 Brandon	FI	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip a Ao	Country	8. This corporation owes or has pa	id the current year Intangible	
24 335	20 111100		o Hillsb.	Personal Property Tax due June		
	9. Name and Address of Curren	t Registered Agent	241	10. Name and Address of New Re	gistered Agent	
STROHAKER, LAURIE J 81 Name Laurie Strohaker						
6114 CRICKETHOLLOW DR 82 Street Address (P.O. Box Number					ole)	
RIVERVIEW FL 33569						
[[83]	•		
			64 CityD	·	B5 Zip Code	
15. Pure upol to the previous of Eastings 607 0602 and 607 5608. Florida Statutes, the above pared corporation pulmits this statement for the purpose of changing its registered.						
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 601 0505, Florida Statutes.						
1			ida Statutes	min TStalakon	3-23-98	
SIGNATURE	Signature, typed y protect name of registered ag	of and tile it applicable (NOTE	Registered Agent signature red	ouired when reinstating)	DATE	
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12	
TITLE	DP	DELETE	1 1 TITLE	The Mas.	Change Addition	
NAME	STROHAKER, WAYNE		1.2 NAME	AZI Cample Lana		
STREET ADDRESS	-6114-GRICKETHOLLOW DR		1.3 STREET ADDRESS	221 Circly lane	de .	
CITY-ST-ZIP	RIVERMEW FL 83569		1.4 CITY - ST - ZIP	standon H 530	46-	
TITLE	DV	☐ DELETE	2.1 TITLE	V-P	Change Addition	
NAME	STROHAKER, LAURIE		2.2 NAME	221 Cody Lane		
STREET ADDRESS	ON TO WHICH THE TABLE		2.3 STREET ADDRESS	Pro - dec 24 27 5	~	
CITY-ST-ZIP TITLE	MAEUAICA LE 33308	☐ DELETE	2.4 CITY-ST-ZIP 3.1 TITLE	Brandon 713351	Change Addition	
NAME		L-J OLLLIE	3.2 NAME		Containing - Machinery	
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-S1-ZIP			3.4 CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		Change Addition	
NAME		•	4. 2 NAME			
STREET ADDRESS			4 3 STREET ADDRESS			
CITY-ST-ZIP			4 4 CITY-ST-ZIP			
TITLE		L] DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAMÉ			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5.4 CITY - ST - ZIP		Change Addition	
TITLE		L. DELETE	6.1 TITLE		Change Addition	
NAME OTROCET ADDRESS			62 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP	certify that the information supplied w	ith this filing does not qualify for	6.4 CITY-ST-ZIP 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.						