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

PROFIT CORPORATION ANNUAL REPORT 1999

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

Mailing Address

DOCUMENT # P96000014591

PANEL DETECTION SYSTEMS, INC.

FILED Apr 26, 1999 8:00 am Secretary of State

04-26-1999 90088 003 ***150.00



9881-WOODMERE PK BLVB 556 OX GARAL DE SUITS 7- VENICE FL 34293 US		3881-WOODMERE PARK BLVD 556 OXFGVA (X-, SHIFE-7 VENICE FL 34293 US		3. D	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 02/15/1996			
2. Principal Pl	ace of Business	2a. Mailing Address			El Number		h	pplied For
21 556	Ox ford Dr.	26 556 0 x love	U Or.	6	<u>5-0649970</u>			lot Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.		5. C	ertifcate of Status Desired		•	Additional tequired
City & State	ice th	City & State	-L	ſ	lection Campaign Financing rust Fund Contribution		•	May Be to Fees
Zip 24 242.G	Country 25 USH	Zip 29 3 4 7 4 3 30	Country USA	,	his corporation owes the curre ersonal Property Tax.	_	gible Yes	№ No
<u></u>	9. Name and Address of Current I	Registered Agent		. 10. N	lame and Address of New R	tegistered Ag	ent	
			81 Name	Mc	Comber, Gler		$\overline{}$	
MOODINGER, Clear Address). Box Number is Not Accepta		<u></u> _	
1383 HNAMOU HOAD SEE OX FOR OV.				226		<u> ۷۲.</u>		
VENI	CE FL 34293		83		·	•		1
			84 City	Ur.	usice	FL	85 Zip	Code
11 Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes.	the above-named	corporation s	ubmits this statement for the	nurnose of ch	anging i	ts 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 607.0505. Florida Statutes.								
	m familiar with, and accept the obligation	ris oi, section 607.0305, Florida	. iz (1 A. C.	and and The	1/10	la	6
SIGNATURE	Signature, types or printed name of registered a part a	nd talle if applicable. (NOTE: Rec	istered Agent signature n	required when rein	mbw Jr.	DATE		
12,	OFFICERS AND	DIRECTORS	13.	AC	DITIONS/CHANGES TO OF	FICERS AND	DIRECT	ORS IN 12
TITLE	D	DELETE	1.1 TITLE				Change	☐ Addition
NAME	MCCOMBER, GLENN R JR.	556 Ox ford br	12 NAME	}				1
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l i	VENICE FL 34293	, ,	1.4 CITY-ST-ZIP	}				ļ
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NAME			6.2 NAME					}
STREET ADDRESS	-		6.3 STREET ADDRESS					
CITY-ST-ZIP	•		6.4 CITY-ST-ZIP	l				

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, with all other like empowered.

SIGNATURE: