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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

D NATIONAL BIO LENIA DINI ATOM ATOM BROND SONO MARON BURNO (MICH LOUIS BEIN BEIN

02/01/97

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600025386 (9)

WOLFF PROTECTION SERVICES, INC.

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Principal Place	e of Busines	5	М	ailing Address				1 20 0 25 0 0 5	IN INITA AKTI BUMA NUMI I	OUR ORIJO RE	TO BUILD I HERE I FAIL	J 0111 1091
8000 NW 54 S LAUDERHILL F				8000 NW 54 STREET LAUDERHILL FL 33351-5069					·			
								3. Date Incor 03/18/19	porated or Qualified	3a. [Date of Last R	eport
2. Principal Place of Business				28. Mailing Address				4. FEI Numb	ər		Ar	oplied For
21 6 1 0 1 NW 44 Lane Sule, Apt. #, eld				26 P. O. Box 10581				65-065	***			ot Applicable
				Suite, Apt. #, etc.					of Status Desired		\$8.75 / Fee Re	
City & State				City & State				6 Election C	ampaign Financing			
	nut Creek, FL			28 Pompano Beach FL					Contribution		\$5.00 Added 1	
Zιρ		Country		Zip	Cou				ration has liability for			
24 33073		₂₅ Browa	1201	33061-	30 B r	oward		Florida Sta		Yes		
		and Address of C	urrent Regis	itered Agent				10. Name and	Address of New I	Registered	Agent	
WOLFF, ARTHUR E 8000 NW 54 STREET 81 Name Edward C. Wolff											·	
						82 Street	Addres	s (P.O. Box Nu	mber is Not Accept	able)		
LAU	DERHILL F	L 33351				83	010	OI NN 4	- Lane	·		
						84 City	0.00	nut Cre	a k	FI	85 Zjp ₃ (Code 3
11. Pursuant I	to the provis	mis of Sections 60	7 0502 and 6	07 1508, Florida Statu	ites the at	nve-named	corner	ration submits t	his statement for the	APPOINT	of changing it	te registered
anto edito	enistered ir	or/both in the	State of Flori	da. Such change was 1, Section 607.0505, F	authorized	thy the corr	poration	n's board of dir	ectors. I hereby acc	ept the ap	pointment as	registered
	11.	11/1/10	o godons o	n, Section 607.030a, r	TOTICA Stati	MOS.			02	1019	7	
SIGNATURE	Signatur Types	or printed harae of galacte	of agent and title	il applicable (NC	TE Rugisterec	Agent signature	e required	when reinstating)	***************************************	DATE	<u> </u>	
12.		OF IGER	S AND DIRE		13.			ADDITIONS	/CHANGES TO OFF	ICERS AN		IS IN 12
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14. do here!	y certify the	it the information su	pplied with the	his filing does not qua	life for the	exemption e	stated in	n Section 119.0	7(3)(i), Florida Statu	tes. I furth	er certify that	the
informatio Lam an o	n indicated ffiger of dire	on this annual repo ctor of the corpora <u>t</u>	icor supplem ion os the rec	ne filly does not dual pental annual report is seiver or trustee empo attachment with an ad	wered to e	ccurate and xecute this r	u tnat m report a	iy signature sha as required by (sii nave the same le Chapter 607, Florida	gai errect a Statutes;	is if made uni and that my r	der oath; that name
appears :	n Block 12 c	or Block 13 if chang	og on an	artachment with an ac	ddress.			_			·	
		/	/. //	121/11/1	Salation	1 8 4			//			ſ