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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jul 23 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000038879 (8)

UNITED	K-9 SECURITY INC.			
	· Programme value			T ARRAMATA ILIP ARIAN BITAL BORAL BRANT BRANT BRANT BRANT PRAFT ARIAL BORAL ARIA 1889
Drinning Diag	a of Dunivage	Mail va Addrona		
Principal Place of Business Mailing Address				
4082 LEO LANE 4082 LEO LANE LAKE PARK FL 33410-6		2		
				3. Date Incorporated or Qualified 3a. Date of Last Report 05/06/1996
	lace of Business	2a. Mailing Address		4. FE Number Applied For
21		26		63-0679 & Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired See Required
City & State	9	City & State		6. Election Campaign Financing \$5.00 May Be
23		28		Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30	Florida Statules 🔲 Yes 🔀 No
	9, Name and Address of Curre	nt Registered Agent	81 Name .	10. Name and Address of New Registered Agent
4062 LEO LANE LAKE PARK FL 33410  83  84				NUMMER TVA P. (odress (P.O. Box Number is Not Acceptable)  62 LEO LANE  AKE PARK 1 FL 85 Zip Code 334/0
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 agont, 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 <u>fa</u> miliar with, and accept the obligations of, Section 607,0505, Florida Statutes.				
SIGNATURE)	(100 K 10)	MUMILLA	<b></b>	HORLIA ITTI
12,	Signature, typed or printed rains of registered age	ent and title if applicable (NOT ID DIRECTORS	E. Registered Agent signature i	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 T(TLE	P/T/D Change Addition
NAME	ISHMAEL, DARRELL		1,2 NAME	WIIMMER IVA P.
STREET ADDRESS	4062 LEO LANE		1.3 STREET ADDRESS	WUMMER IVA P. 4062 LO LANE
CITY-ST-ZIP	LAKE PARK FL 33410		1.4 CITY-ST-7IP	LAKE PARK FL 33410
TITLE	, , , , , , , , , , , , , , , , , , , ,	DELETE	2,1 TITLE	Change Addition
NAME			22 NAME	
STREET ADORESS			20 STREET ADDRESS	
CHTY-ST-ZIP			2 M CITY - ST - ZIP	
TATLE		DELETE	3 111LE	Change Addition
NAME			3₽ NAME	
STREET ADDRESS			33 STREET ADDRESS	
CITY-ST-ZIP			3,4, CITY-S1-7IP	
TITLE		☐ DELET€	41.10CE	Change Addition
NAME			4, 2 NAME	
STREET ADDRESS			4 3 STREET ADDRESS	
City-ST-ZIP		☐ DELETE	4.4 S(1Y+S1+Z)P 5.1 T(1)LE 1.2	Addition
TITLE		☐ NETER	<b>1</b>	9000022461 19 Addition -07/24/9701006021
NAME CENTET ADDRESS			5.2 NAME	-07/24/9701006021
STREET ADDRESS			53 STREET ADDRESS	***SS0.00
CITY-ST-ZIP TITLE		DELETE	5.4 CITY- ST - ZIP 6.1 TITLE	• ND happer Addition
NAME			62 NAME	
STREET ADDRESS			63 STREET ADDRESS	オーライ
DIRECT ADDRESS			6 A CITY - ST - 7(P	1 20

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statules. 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 early 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 Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

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