

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

PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

FILED

99 MAR 25 PM 4:53

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # P96000038879
 1. Corporation Name United K-9 Security Inc.
 Principal Place of Business United K-9 Security Inc.
 Mailing Address

4062 Leo Lane
 Palm Beach Gardens
 FL 33410

| | | | |
|----|--------------------------------|----|---------------------|
| 21 | 2. Principal Place of Business | 2a | Mailing Address |
| 22 | Suite, Apt. #, etc. | 26 | Suite, Apt. #, etc. |
| 23 | City & State | 27 | City & State |
| 24 | Zip | 28 | Country |
| 25 | Country | 29 | Zip |
| 30 | | 30 | Country |

9. Name and Address of Current Registered Agent
 IVA P. WUMMER
 4062 LEO LANE
 PALM BEACH GARDENS, FL
 33410

| | | |
|----|--|------------------------|
| 81 | Name | 100002831341--8 |
| 82 | Street Address (P.O. Box Number is Not Acceptable) | -04/06/99--01088--010 |
| 83 | City | ***150.00 FL ***150.00 |
| 84 | City | |

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 04/12/96

4. FEI Number 65-0679731 Applied For Not Applicable

5. Certificate of Status Desired [] \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution [] \$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax [] Yes [] No

10. Name and Address of New Registered Agent

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.

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when non-stable) DATE

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---------------------------|---|-------------------------|
| TITLE | [] DELETE | 11 TITLE | [] Change [] Addition |
| NAME | IVA P. WUMMER | 12 NAME | |
| STREET ADDRESS | 4062 LEO LANE | 13 STREET ADDRESS | |
| CITY-ST-ZIP | PALM BEACH GDNS, FL 33410 | 14 CITY-ST-ZIP | |
| TITLE | [] DELETE | 21 TITLE | [] Change [] Addition |
| NAME | | 22 NAME | |
| STREET ADDRESS | | 23 STREET ADDRESS | |
| CITY-ST-ZIP | | 24 CITY-ST-ZIP | |
| TITLE | [] DELETE | 31 TITLE | [] Change [] Addition |
| NAME | | 32 NAME | |
| STREET ADDRESS | | 33 STREET ADDRESS | |
| CITY-ST-ZIP | | 34 CITY-ST-ZIP | |
| TITLE | [] DELETE | 41 TITLE | [] Change [] Addition |
| NAME | | 42 NAME | |
| STREET ADDRESS | | 43 STREET ADDRESS | |
| CITY-ST-ZIP | | 44 CITY-ST-ZIP | |
| TITLE | [] DELETE | 51 TITLE | [] Change [] Addition |
| NAME | | 52 NAME | |
| STREET ADDRESS | | 53 STREET ADDRESS | |
| CITY-ST-ZIP | | 54 CITY-ST-ZIP | |
| TITLE | [] DELETE | 61 TITLE | [] Change [] Addition |
| NAME | | 62 NAME | |
| STREET ADDRESS | | 63 STREET ADDRESS | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | |

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: Iva P. Wummer Date: March 21, 1999 (561) 301839

CR2E034 (11/98)