Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90058 026 ***150.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000050271

1. Corporation Name

SECURE COM INTERNATIONAL, INC.

OLOGIIL	OOM INTERNATIONAL, IN					
Principal Place of Business Mailing Address						125/1201 (in 1815) ditts natit entre entat entre entat entre transcent
STE. 810. 3300 PGA BLVD. STE. 810. 3300 PGA BLVD.						
PALM BEACH GARDENS FL 33410 PALM BEACH GARDENS FL				33410		
						DO NOT WRITE IN THIS SPACE
						3. Date Incorporated or Qualifed 06/12/1996
2. Principal Place of Business 2a. Mailing Ad			55			4. FEI Number Applied For
21		26	26			65-0672516 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & 5 tate	City & State City & State					6. Election Campaign Financing \$5.00 May Be
23	28					Trust Fund Contribution Added to Fees
Zip	Country Zip C		Count	lry		This curporation owes the current year Intangible
24	25	29	30			Personal Property Tax.
	9. Name and Address of Curre	nı Registered Agent			_	10. Name and Address of New Registered Agent
FED	DADEOL DANIEL I		8	31	Name	
	raresi, daniel j		8	32	Street Ad	Idress (P.O. Bo) Number is Not Acceptable)
	PGA BLVD					
	E 810		8	33	_	
PALI	WI BCH GDNS FL 33410		_	34	City	85 Zip Code
			· ·	>4	City	FL ° 25 ° ° ° °
office or reagent. Fail	egistered agent, or both, in the State m familiar with, and accept the obligation Signature, typed or printed halp of registered age	ations of, Section 607.0505, Fi	orida Statut	es.		ition's board of directors. I hereby accept the appointment as registered
12.	OFFICERS AND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITL	Ε		☐ Change ☐ Addition
NAME	117011110, 177122.02		1.2 NAM	E	ĺ	
STREET ADDRESS	230, 4.2, 4.0, 5000		1.3 STR	EET	ADDRESS	
CITY-ST-ZIP	PALM BEACH GARDENS FL 33410		1.4 CITY	1.4 CITY-ST-ZIP		·
TITLE	D	☐ DELETE	2.1 TITL	E		☐ Change ☐ Addition
NAME	FERRARESI, DANIEL J	SI, DANIEL J		E		
STREET ADORE 3S	OTT ALC GOOD DOLDING		2.3 STR	EET	ADDRESS	
CITY-ST-ZIP				Y- S1	T-ZIP	
TITLE	D	☐ DELETE	3.1 TITL	3.1 TITLE		☐ Change ☐ Addition
NAME	ROMANO, EDWARD J	32		Œ	}	
STREET ADDRE 3S	OTE 040 0000 DCA DUVD		3.3 STR	EET	ADDRESS	
TALL S TO S			3.4. CIT	3.4. CITY-ST-ZIP		
TITLE				41TITLE		☐ Change ☐ Addition
NAME	4.2		4. 2 NAM	ИΕ		
STREET ADDRESS	I		4.3 STR	EET.	ADDRESS	
CITY-ST-ZIP			1	44 CITY-ST-ZIP		
TITLE	<u> </u>		51 TITL			☐ Change ☐ Addition
NAME			5.2 NAM	Œ		
STREET ADDRESS			5.3 STR	EET	ADDRESS	
CITY-ST-ZIP			5.4 CITY	r-st	r-ZIP	
	TITLE DELETE 6			I TITLE		Change Addition
			6.2 NAM	4E		

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 of 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, of the anattachment with an address, with all other like empowered.

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

BIGHTU TE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-6/- 627 - 6/11/1 Daytime Phone #