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

**PROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000057042 (9) CONFIDENTIAL CORPORATE SECURITY, INC.

## **FILED** May 09 1997 8:00am Secretary of State



Principal Place 7320 NE 1ST F MIAMI FL 3313	PLACE	7320 NE 1ST PL	Mailing Address 7320 NE 1ST PLACE MIAMI FL 33138-5302							
						<ol> <li>Date Incorporated or Qualifie 07/03/1996</li> </ol>	d 3a. D	ate of L	ast Re	port
	lace of Business	2a. Mailing Add	ress			4. FEI Number			Apı	olied For
21	<del></del>	26						1	<del></del> -	Applicable
Sulte, Apt.		Suite, Apt. #				5. Certificate of Status Desired			75 A	dditional quired
City & State	0	City & State				6. Election Campaign Financing	_			Мау Ве
Zip	Country	28   		ountry	,	Trust Fund Contribution	<u> </u>			Fees
24	25	29	30	ou a y	1	8, This corporation has liability for intangible tax under s 199.032, Florida Statutes ☐ Yes ☑ No			199.032,	
	9. Name and Address of		190]	7		10. Name and Address of New		·	••••	
KUB	LIN, BRETT			81	Name					
7320	O NË 1ST PLACE MI FL 33138				Streel Add	dress (P.O. Box Number is Not Acceptable)				
· mus	mi r E 03 100			83			· <del>-</del> ····			<del></del>
				B4	Cily		FL	85	Zip C	ode
	to the provisions of Sections 6 registered agent, or both, in the manufamiliar with, and accept the	07.0502 and 607.1508, Flor e Stale of Fiorida. Such cha e obligations of, Section 60	ida Statutes, the nge was authoriz .0505, Florida St	above ed by atute:	e-named corp y the corpora s.	poration submits this statement for the dion's board of directors. I hereby acc		f chang pointme	jing its nt as r	registered registered
SIGNATURE	Signature, typed or printed name of regis	dered agent and title if applicable.	(NOTE Registe	red Age	inper erulangia tro	red when reinstating)	DATE			
12.		RS AND DIRECTORS	13	l		ADDITIONS/CHANGES TO OF	FICERS AN			
TITLE	U DUM DOCT	LJI	ELETE 1.1	TITLE				[] Ch	ange	Addition
NAME	KUBLIN, BRETT 7320 NE 1ST PLACE			NAME						
STREET ADDRESS	MIAMI FL 33138				ADDRESS					
CITY-ST-ZIP TITLE	INDEM 1 C OO 100	П		CITY-S	51 - ZIP		····	Cha	ange	Addition
NAME		-		NAME						123 / 100/110
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP			24	CITY-	S1-7/P					_
TITLE			DELETÉ 3.1	IIILE				Cha	ange	Addition
NAME			3.2	NAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP TITLE				CITY-!	ST-ZIP			] Cha	2000	Addition
NAME			1	NAME				L-J VIII	ango	ביין אטטונוטו
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				CITY-5	i					
TITLE				TILE	-			Cha	ange	Addition
NAME			5.2	NAME						
STREET ADDRESS			5.3	STREET	ADDRESS					
CITY-ST-ZIP				CITY- S	ST - ZIP					
TITLE		ī [_]	ELETE 61	TITLE				Cha	ange	Addition
NAME				NAME						
STREET ADDRESS					ADDRESS					
City-St-ZiP			6.4	CHY-S	S1 - ZIP					

14. I do hereby certify that the information supplied with this filing does information indicated on this annual report or supplemental annual I am an officer or director of the corporation or the received or director appears in Block 12 or Block 13 if change or or on an algorithm. We exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the nd accurate and that my signature shall have the same legal effect as if made under oath; that is execute this report as required by Chapter 607, Florida Statutes; and that my name