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

**PROFIT CORPORATION** ANNUAL REPORT

1998



## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name P96000057049 (4)

**DELRAY SECURITY, INC.** 

**FILED** Apr 08 1998 8:00am Secretary of State



Principal Place of Business Mailing Address							i issiinat in inin mini anii daii da	III <b>BBIBI B</b> ILAI	(881) <b>68</b> 111 <b>6</b> (6	110 (811 1881	
006 EAGLE DI DELRAY BEAC		606 EAGLE DRIVE DELRAY BEACH FL 33444					DO NOT WRITE	IN THIS S	PACE		
							3. Date Incorporated or Qualified				
							07/08/1996		7 1.		
· · ·	ace of Business	2a. Mailing Address					4. FEI Number		Applied For		
21		26	Suite, Apt. #, etc.				65-0718608			ot Applicable	
Suite, Apt. i		27	27				5. Certificate of Status Desired		Fee R	Additional equired	
City & State	)	28 City 8	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	Country	Ζip					8. This corporation owes or has paid the current year Intangible				
24				30	, ,		Personal Property Tax due June 30. Yes No  10. Name and Address of New Registered Agent				
	9. Name and Address of Curre	nt Registered /	Agent			<b>6</b> 1	10. Name and Address of New Re	gistered A	lgent		
	O, MICHAEL C				81	Name			*	1	
680	0 W COMMERCIAL BLVD STE :	5	ţ			82 Street Address (P.O. Box Number is Not Acceptable)					
FT	LAUDERDALE FL 33319										
					83						
				-	84	City		FL	<b>85</b> Zip	Code	
44 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: Re						nt signature requ	ulred when reinstating)	DATE	DIDECTOR	DO 451 40	
12.		ID DIRECTORS	DELETE	13.	T1 F	· · · · · ·	ADDITIONS/CHANGES TO OFFI	JEHS AND	Change	Addition	
TITLE	0		·		1.1 TITLE 1.2 NAME				☐ Onenge	L Addition	
NAME	FERTEL, DAVID J										
STREET ADDRESS	606 EAGLE DRIVE		l l			ADDRESS					
CITY-ST-ZIP	DELRAY BEACH FL 33444	· · · · · · · · · · · · · · · · · · ·			TY - \$1	r-ziP			Change	Addition	
TITLE	M DEDAMIN DILL		_		2.1 TITLE 2.2 NAME				onongo		
NAME	PERMUY, BILL		•		2.3 STREET ADDRESS					ŀ	
STREET ADDRESS	4601 LANTANA ROAD										
CITY-ST-ZIP TITLE	LAKE WORTH FL		DELETE	3.1 Ti	ITY-S	1-ZIP			Change	Addition	
NAME				3.2 N							
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP					ITY-S	1					
TITLE		<del></del>	DELETE	4.1 Ti					Change	☐ Addition	
NAME				4.21					_		
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City-St-Zip					ITY - S'						
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NAME				5.2 N	AME						
STREET ADDRESS						ADDRESS					
CITY-ST-ZIP					ITY-S						
TIRLE			DELETE	6.1 Ti				•	Change	Addition	
NAME				6.2 N	AME						
STREET ADDRESS				6.3 S	TREET	ADDRESS			•		
CITY-ST-ZIP				6.4 C	ITY-S	T - 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 of Siege 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 impaddress.

CIGNATURE: