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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000060198 (4)

RAPID FIRE PROTECTION, INC.

Principal Place of Business

Mailing Address

2338 IMMOKALEE ROAD. #101

2338 IMMOKALEE ROAD. #101

FILED

80:1111 1- YAM 86

SECHALM A CORSTANTE TALLAH ARRENT FLOREDA



MAPLES FC 33945		NAPLES FL 33942				DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified			
4 5 1 1 1 1 5						07/18/1996			
2. Principal P	lace of Business	2a. Mailing Address	٦ - "			4. FEI Number	_ 	pplied For	
Suite, Apt.	# atc	Suite, Apt. #, etc.				65-0679921		ot Applicable	
22	π, θιο.	27				5. Certificate of Status Desired		Additional equired	
City & State	8	City & State				6. Election Campaign Financing		· · · · · · · · · · · · · · · · · · ·	
23		28				Trust Fund Contribution		May Be to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation owes or has paid the curre			
24	25	29	30			Personal Property Tax due June 30.	Yes [] No	
	Name and Address of Currer	nt Registered Agent		641	No	10. Name and Address of New Registered A	gent		
	LME, NICHOLAS			81	Name				
	8 IMMOKALEE ROAD, #101			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
NAI	PLES FL 33942			83		7000025142	> 1 - 7	8	
						-05/06/9801	116	015	
				84	City	****150 . @0	李子 李子!	500:00	
11. Pursuant I	to the provisions of Sections 607.050	2 and 607.1508. Florida Stal	utes the at	OOVE-	-named corn		hanging i	te registered	
office or re	egistered agent, or both, in the State	of Florida, Such change wa	s authorized	d by	the corporati	oration submits this statement for the purpose of coon's board of directors. I hereby accept the appo	ntment as	registered	
	with the accept the only	anons or, decider to 7.000,	rioiloa stat	utes.					
SIGNATURE	Signature, typod or printed name of registered age	ent and title it applicable (N	O1F Registeres	i Agen	it signature require	od when reinstating) DATE			
12.	OFFICERS AN		13.			ADDITIONS/CHANGES TO OFFICERS AND		1S IN 12	
TITLE	P	L_] DELETE	1.1 1(1	LE			Change	Addition	
NAME	HULME, NICHOLAS M		1.2 NA					İ	
STREET ADDRESS	2338 IMMOKALEE RD #101			1.3 STREET ADDRESS				ŀ	
CITY-ST-ZIP TITLE	NAPLES FL 34110			Y-ST	· ZIP		705		
NAME	_ Detert			2 1 TITLE 2.2 NAME			Change	Addition	
STREET ADDRESS					ADDRESS .				
CITY-ST-ZIP			8	2. 4 CITY-ST-ZIP					
TITLE		DELETE	3.1 TITLE		- 211		Change	Addition	
NAME			3.2 NA	ME		_			
STREET ADDRESS			3.3 ST	REET A	ODDRESS				
CITY-ST-ZIP			3.4. CI	TY-\$T	-ZIP				
TITLE		DELETE	4.1 TIT	LE			Change	☐ Addition	
NAME			4 2 NA	ME					
STREET ADDRESS			4 3 ST	A 133P	ODRESS .				
CITY-ST-ZIP		T neurit	4.4 CIT		· ZIP				
TITLE		☐ DELFTE	5.1 717			, .	Change	Addition	
NAME CENTER ADDRESS			5.2 NA			L~ a	U		
STREET ADDRESS					DDRESS	7 1/1			
CITY-ST-ZIP TITLE		DELETE	5.4 CIT 6.1 TIT		<u> </u>		Change	Addition	
NAME		- otter	6.2 NA			n r	⊐ AlianAc	- Addition	
STREET ADDRESS					DDRESS				
CITY-ST-ZIP			6.4 CIT						

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. NICHOLAS HULME

100