FILE NOW: FILING FEE AFTER MAY 1 IS \$55D.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Socretary of State

DIVISION OF CORPÓRATIONS

DOCUMENT # P96000077394 (0)

PEEK-A-BOO SURVEILLANCE, INC.

Principal Place of Business

Mailing Address

FILED May 20 1997 8:00am Secretary of State



| 1487 RED PINE TRAIL WELLINGTON FL 33414 | | 1487 RED PINE TRAIL WELLINGTON FL 33414-5829 | ; ;) . | | |
|---|---|---|--|--|---|
| | | | | 3. Date Incorporated or Qualified 09/17/1996 | 3a. Date of Last Report |
| Principal Place of Business The Principal Place of Business The Principal Place of Business | | 2a. Mailing Address 26 | | 4. FEI Nijmber 65-06 | 94945 Applied For Not Applicable |
| Suite, Apt. #, etc. | | Suite, Apt. #, etc. | | 5. Certificate of Status Desired | \$8.75 Additional Fee Regulred |
| City & State | e | City & State | | Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees |
| Zip | Country | | Country | 8. This corporation has liability for | intangible tax under s. 199.032. |
| 24 | 25 9. Name and Address of Curr | | 10 | Florida Statutes 10. Name and Address of New Re | Yes X No gistered Agent |
| 452 SUI | RPORATE CREATIONS ENTERF 1 PGA BOULEVARD TE 211 M BEACH GARDENS FL 33418 | | 81 Name 82 Street Add 83 84 City | YWYHIA A. GULL Hess (P.O. BOX Number is Not Acceptate BY ROD PINE TANIL | FL 85 Zip Code |
| 11. Pursuant office or ragent. La | 1 Sollier | 1 / Ded | ∠ 1: | poration submits this statement for the parties to be acceptation's board of directors. I hereby acceptation's board of directors are supported to the property acceptance of the prope | ourpose of changing its registered of the appointment as registered |
| 12, | Sign ture type d or printed name of registered a | NOTE CTORS | Hegistered Agent signature requ | ued when reinstating) ADDITIONS/CHANGES TO OFFICE | DATE CERS AND DIRECTORS IN 12 |
| TITLE | D | DELETE | 1.1 THTLE | | Change Addition |
| NAME | GULI, CYNTHIA | | 1.2 NAME | | |
| STREET ADDRESS | 1487 RED PINE TRAIL WELLINGTON FL 33414 | | 1.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | MEDERICATOR TE COTTY | DELETE | 1.4 C(TY - S1 - 2IP 2.1 T(LE | | Change Addition |
| NAME | | | 2.2,NAME | | |
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| TITLE | | ☐ DEFEIE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | • | |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELETE | 5.4;CITY - ST - ZIP 6.1 TITLE | | Change Addition |
| NAME | | | 62 NAME | • | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | | } |
| CITY-ST-ZIP | | | 64 CTY-ST-ZIF | | |
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ng does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name