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

CORPORATION ANNUAL REPORT

1997



FLOR DA DEPARTMENT OF STATE

FILED

Mar 13 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P96000080982 (7)**

NELSON ALEMAN

SIGNATURE AND TYPED OR PRINTED NAME OF

SIGNATURE:

U.S. CITIZEN OFFICER PATROL SERVICES, INC.

Principal Environt Business Mailing Address 10310 SOUTHWEST 40 TERRACE 10310 SOUTHWEST 40 TERRACE MIAMI FL 33165-4918 MIAM! FL 33165 3. Date Incorporated or Qualified 3a. Date of Last Report 09/30/1996 09/30/96 2a. Maling Address 4. FEI Number 2. Principa (Place of Basinesia Applied For 65-0698533 Not Applicable 26 Scite Apt # etc. Sun Act Mod. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State Official State \$5.00 May Be 6. Election Campaign Financing 23 28 Trust Fund Contribution Added to Fees Country. Country 8. This corporation has liability for intangible tax under s. 199 032 Yes No 29 Florida Statutes 24 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name **AMERILAWYER CHARTERED** 343 ALMERIA AVENUE Street Address (P.O. Box Number is Not Acceptable) **CORAL GABLES FL 33134** 63 84 City Zin Code 11. Possion to the consecute of Got one 607.0502 and 607.1908, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of second a port or hole, in the Citie of Florida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. Faction on with land accept the obiganors of Section 607.0505, Florida Statutes. SIGNATURE (NCITE Registered Agent signature required when reinstating) buy the hyperbergers for a other as three multiput directions. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. 13. DELETE PTD Change Addit on 1.1 THILE 11-1 ALEMAN, NELSON C **1.2 NAME** CR2E034 NOS 10310 SOUTHWEST 40 TERRACE 1.3 STREET ADDRESS **MIAMI FL 33165** 1.4 CITY - \$1 - ZIP CICS ZP DELETE Change VSD \_\_ Addition 2.1 7171.5 **ALEMAN, MIRIAM** 2.2 NAME 10310 SOUTHWEST 40 TERRACE 2.3 STREET ADDRESS SHEEL MILES **MIAMI FL 33165** 2 4 CITY-SI - ZIF (75 (1 76 DECETE Change \_\_\_\_ Addition 201. 3.1 LILLE 3.3 STREET ADORESS 5 (1802) Blad 3.4 City-\$1-ZiP DELETE 4.1 1011 F ☐ Change Addition 14.5 NAM. 4 2 NAME 4.3 STREET ACORESS 51 F 12 50 10 4.4.0:1Y - ST- ZIP table to the I HE LE TE Change noitibbA .... 1.03 5 1 TITLE 5.2 NAME SERVICE ORDER 5.3 STREET ADDRESS 06Y 51 7 5.4 CHY - ST- ZIP Addition DELETE Change 137 €1 TILLE MOSS 6.2 NAME 6.3 STREET ADDRESS

64 City - St - ZiP

03/09/97

305 223-5654

14. First lend to verify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information must report or supplied ental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I are another or the formation or the reserver or trustee exposured to execute this report as required by Chapter 607, Florida Statutes, and that my name adsource of 13 or or an attrachment with a formation.

305 221 – 6657

ING OFFICER OR DIRECTOR