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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Matham 🏄

**FILED** 

Jun 11 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P96000081431 (4)

P.C. AFFORDABLE SECURITY II. INC.

Bringlant	Disea of Pusings	Mailion Address								
Principal Place of Business			Mailing Address							
6401 CONGRESS AVENUE			6401 CONGRESS AVENUE							
BUITE 120 BOCA RATON FL 33487			SUITE 120 BOCA RATON FL 33487-2841							
DOVIN IN	HOH FE WHO!	BOON INTOINTE CONOT	2071			3. Date Incorporated or Qualified 10/02/1996	3a. Dal	le of Last f	Report	
2. Principal Place of Business			2a. Mailing Address				4. f i Number		T A	pplied For
21			26			65-070034		N	lot Applicable	
Sulte, Apt. #, etc.			Suite, Apt. #, etc.				F. Codificate of Classic Decised		\$8.75	Additional
22		27			5. Certificate of Status Desired		Fee R	Required		
City & State			City & State				6. Election Campaign Financing		\$5.00	May Be
23		26				Trust Fund Contribution			to Fees	
Zip		Dountry	<b>Ζ</b> ιρ	Count	ry		8. This corporation has liability for in	ntangible t	lax under s	s. 199.032
24	25		29	30					] No	·
	9. Name and	Address of Current R	egistered Agent				10. Name and Address of New Reg	stered A	gent	·
1	<b>GURLEY, SCOTT</b>			8	1	Namo				
	6401 CONGRESS A					//D.G. D				
SUITE 120				82 Street A			ess (P.O. Box Number is Not Acceptab	ie)		
* BOCA RATON FL 33487				83			# · C ·			
BOOM IMIGHT PL 33407					┈.					
				8-	4	City		FL	<b>85</b> Zip	Code
44 Dura	upat to the provisions	of Castions 607 0600 o	nd 607 1500. Florido Ctot	den the pho	. <u>.</u> L	paged ages	protion as hereito this statement for the			
office ager	e or registered agent, ont. I am lamiliar with, an	or both, in the State of accept the obligation	Florida, Such change was ns of, Section 607.0505, I	authorized t lorida Statule	98.	the corporation.	pration submits this statement for the pon's board of directors. I hereby accep	t the appo	ointment as	s registered
SIGNATU										
46	Signature, typed or prin			gen	nt signature requirer		DATE	5.55656		
12.		OFFICERS AND D		13.			ADDITIONS/CHANGES TO OFFIC			
TITLE	PD	<b>~~~</b>	L DEILETE	1171716					Change	☐ Addition
NAME GURLEY, SCOTT			=	1.2 NAME						
STREET ADDRESS 6401 CONGRESS AVENUE, SUITI			E 120	1.3 STREET ADDRESS		ADDRESS				
CITY-ST-Zi		N FL 33487		1.4 CITY-	Sī	- ZIP				
TITLE	VD		☐ DELETE	21 MILE				ļ	Change	Addition
NAME	COFFER, PRE	eston		2.2 NAME	:					
STREET ADDRESS   8401 CONGRESS AVENUE, SUITE			E 120	2.3 \$1REE1 ADDRESS		ADDRESS				
CITY-ST-ZIP BOCA RATON FL 33487				2. 4 C/1Y - S1 - Z/P		1 - ZIP				
TITLE			DELETE	3.1 1111.8					Change	Addition
NAME	1			3.2 NAM5						
STREET ADD	RESS			3.3 STREE		ADDRESS				
CITY-ST-ZII	ŀ			3.4. C(1)						
TITLE	·		DELETE	4.1 TITLE					Change	Addition
NAME				4. 2 NAM						
STREET ADD	pres			4.3 STREE		ADDRECC				
CITY-ST-ZI	<u>r</u>		DELETE	4.4 CHY-	SI	· (II)			Change	Addition
TITLE			וייין אינינונ	5.1 TITLE		-		,	L) Diange	FT YOURDH
NAME				5.2 NAME						
STREET ADD	RESS			5.3 STREE	1 A	4DDRESS				
CITY-ST-ZIF	Р			5.4 CITY-	S1	- 71P				
TITLE			☐ DELETÉ	6.1 TITLE		}			Change	☐ Addition
NAME				6.2 NAME						
STREET ADD	ress			6.3 STREE	1 A	ADDRESS				

14. I do hereby certify that the information supplied with this filling 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 logal 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

ichment with an address.