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May 07 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT
1998

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000084103 (6)

1. Corporation Name
CONCOURSE SECURITY SERVICES INC.

[redacted]

Principal Place of Business
5440 N. STATE ROAD 7 SUITE 214
FORT LAUDERDALE, FL 33319

Mailing Address
5440 N. STATE ROAD 7 SUITE 214
FORT LAUDERDALE, FL 33319

3. Date Incorporated or Qualified: 10/07/1996
3a. Date of Last Report: N/A

2. Principal Place of Business
21 5440 N. STATE ROAD 7,
Suite, Apt. #, etc.
22 SUITE 214
City & State
23 FORT LAUDERDALE FL
Zip 24 33319 Country 25 BROWARD

2a. Mailing Address
26 5440 N. STATE ROAD 7,
Suite, Apt. #, etc.
27 SUITE 214
City & State
28 FORT LAUDERDALE, FL
Zip 29 33319 Country 30 BROWARD

4. FEI Number: 65-0743267
☐ Applied For
☐ Not Applica

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for Intangible tax under s. 199.032, Florida Statutes ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

LEXIMA, FELIX
1249 SUSSEX DRIVE
NORTH LAUDERDALE FL 33068

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. 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: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addi PRESIDENT—D FELIX LEXIMA 1249 SUSSEX DR. NORTH LAUDERDALE, FL. 33068
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addi SECRETARY/TREASURER MARIE CAROLE SERGILE 8717 SHADOWWOOD #210 CORAL SPRINGS, FL 33067
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☐ Addi
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addi
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14. I do 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; 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.

SIGNATURE: Felix Lexima 4/28/98 (954)714-926