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 # P96000087444 (1)

D & L SECURITY CORP.

Principal Place of Business

Mailing Address

FILED May 04 1998 8:00am Secretary of State



4300 SW 116 MIAMI FL 331		4300 SW 116 AVE MIAMI FL 33165			DO ALOT HUDITE IN THIS OF	MOE	
US		US			DO NOT WRITE IN THIS SE 3. Date Incorporated or Qualified	ACE	
	_				10/23/1996		
	lace of Business	2a. Mailing Address	. \ =	3 57	4. FEI Number		lied For
21 /299	<u> </u>		$\frac{2}{2}$	2 21	65-0701765		Applicable
	one	Suite, Apt #, etc.	_		5. Certificate of Status Desired	\$8.75 Ad Fee Req	
	ami, tL	City & State 28 MIGMI, +	miami,+L		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zig 33175 Country 25 33175 30 Country			Count in	ry	8. This corporation owes or has paid the curre Personal Property Tax due June 30.		ngible No
Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
LUIS, CARLOS A				81 Name LUIS CAPLOS A			
4300 SW 116 AVE			8	2 Street A	Indiress P.O. Box Number is Not Acceptable.		
MIAMI FL 33165			ē		2954 SW 63 STR	eet	
			}°	3	•		ı
			8	4 City	miami. FL FL	85 2 9 9	9975
11. Pursuant t	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the abo	ve-named c	corporation submits this statement for the purpose of o	hanging 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, typod or printed namural registered agrees and stilled applicable (NOTE: Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND		13.	gent signature ti	ADDITIONS/CHANGES TO OFFICERS AND I	DIRECTORS	IN 12
TITLE	DPS	☐ DELETE	1.1 TITLE			Change	Addition
NAME	LUIS, CARLOS A		1.2 NAM	£			
STREET ADDRESS	4300 SW 116 AVE.		1.3 STRE	et address];
CITY-\$1-ZIP	MIAMI FL 33165		1.4 CITY	-ST-ZIP			
TITLE		☐ DELETE	2.1 TITLE		L	Change	Addition
NAME			2.2 NAM	l l			ł
STREET ADDRESS				FT ADDRESS			
CITY-ST-ZIP TITLE		DELETE	2. 4 CITY 3.1 TITLE	-ST-ZIP		Change	Addition
NAME			3.2 NAM	ſ	<u>-</u>	1 Climite	
STREET ADDRESS				ET ADDRESS			1
CITY-ST-ZIP			1	-ST-ZIP			
TITLE		☐ DELĒTE	4.1 TITLE			Change	Addition
NAME			4 2 NAM	E			
STREET ADDRESS			4.3 STRE	ET ADDRESS			
CITY-ST-ZIP			4.4 City			····	
TITLE		☐ DELETE	5.1 TITLE			Change	☐ Addition
NAME			5.2 NAM	J			
STREET ADDRESS				ET ADDRESS	·		
CITY-ST-ZIP		DELETE	5.4 CITY		F	Change	Addition
TITLE NAME		_ vertie	6.1 TITLE 6.2 NAM		L	⊒ ∩імп ў ф	T vanifiali
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			6.3 STRE				
0111-01-¢lr			0.4 (111	OL VIE			

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 supplicmental 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 receives 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 ordan attacty night with an address.

SIGNATURE:

4-23-98 (305) 225-8079