## 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 # P96000101814 (7)

KEMP SECURITY & INVESTIGATIVE SERVICES INC.

## FILED Mar 25 1998 8:00am Secretary of State



Principal Place	e of Business	Mailing Address	Mailing Address			A MANUSAL IIA MANUSAL MANUSAL MANUSANI MANUSANI		
5903 S.W. 21ST STREET		5903 S.W. 21ST ST	5903 S.W. 21ST STREET					
HOLLYWOOD FL 33023		HOLLYWOOD FL 33	HOLLYWOOD FL 33023		DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	THIS SPACE	
						12/16/1996		
2. Principal P	lace of Business	2a. Mailing Address	·····			4. FEI Number	Applied For	
21	acc or business	26				59-34 16335	Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.		_	<b>CR 75</b> Addisonal		
22		27	<del>  -  </del>		5. Certificate of Status Desired	Fee Required		
City & State			City & State		6. Election Campaign Financing	\$5.00 May Be		
23		—	28			Added to Fees		
Zip	Country	Zip	Co	untry		8. This corporation owes or has paid		
24	25	29	30			Personal Property Tax due June 30		
<u> </u>	9. Name and Address	of Current Registered Agent	1001	1		10. Name and Address of New Regis		
ADERINOKUN, ADEOLA C					Name	· · · · · · · · · · · · · · · · · · ·		
5903 S.W. 21ST STREET					6	77		
	LLYWOOD FL 33023			82	Street A	ddress (P.O. Box Number is Not Acceptable)		
	20000			83				
				Ш				
				84	City		FI 85 Zip Code	
11 Pursuant	to the provisions of Sections	s 607 0502 and 607 1508. Florida 9	latutes the s	hove	-named o	corporation submits this statement for the nurr		
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, typod or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)  DATE								
12.		CERS AND DIRECTORS	13.		in bigitatare i	ADDITIONS/CHANGES TO OFFICER		
TITLE	D	DELETE		ITLE			Change Addition	
NAME	ADERINOKUN, ADEO	DLA C	1.2 N	IAME	ŀ			
STREET ADDRESS	5903 S.W. 21ST STR		135	TREET	ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL 330	023		ITY-SI	L			
TITLE	P	☐ DELETE			<u>'-•''</u>		Change Addition	
NAME	FALUADE, DAVID	_	2.2 8	IAME				
STREET ADDRESS	5903 SW 21 ST.				ADDRESS			
CITY-ST-ZIP	HOLLYWOOD FL			CITY-S				
TITLE		DELETE			1-24		Change Addition	
NAME				IAME				
STREET ADDRESS					ADDRESS		]	
CITY-ST-ZIP				CITY-S				
TITLE		DELETE			1-211		Change Addition	
NAME			1	NAME	1			
STREET ADDRESS					ADDRESS		ļ	
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CITY-ST-ZIP TITLE		DELETE		ITY-ST	· ZIF		Change Addition	
NAME		Burnet DECEVE		IAME				
STREET ADDRESS					ADDRESS			
' I								
CITY-ST-ZIP TITLE	<del></del>	DELETE		ITY-ST	1 - £IP		Change Addition	
		U DECENE						
NAME				IAME				
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			6.4 C	ITY-\$1	r- <b>ŻI</b> ₽			

14. 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 supplemental 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 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:

41.15

CR2E034 (10/97