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 # P96000104545 (4)

SECURE COMMUNICATIONS INC.

FILED May 28 1998 8:00am Secretary of State

154-763-1288

Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27 City & State City & State 23 Zip Country Zip		5. Certificate of Status Desired \$8.75 And Fee Rection Campaign Financing Trust Fund Contribution Added to \$1.00 And the current year Intal	vlay Be Fees ngible
P.O. BOX 7375 FT LAUDERDALE FL 33316 2. Principal Place of Business 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. City & State 2. City & State 2. Country 2. FRIEDLANDER, SHERRY 1301 \$. ANDREWS AVE.	Country 30	3. Date Incorporated or Qualified 01/01/1997 4. FEI Number App (55-07/7/05 Not 5. Certificate of Status Desired \$8.75 Ar Fee Rec 6. Election Campaign Financing Trust Fund Contribution Added to 8. This corporation owes or has paid the current year Intal Personal Property Tax due June 30. Yes	Applicable dditional quired May Be p Fees ngible
2. Principal Place of Business 26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State 28 Zip Country Zip 29 R. Name and Address of Current Registered Agent FRIEDLANDER, SHERRY 1301 \$. ANOREWS AVE.	Country 30	3. Date Incorporated or Qualified 01/01/1997 4. FEI Number App (55-07/7/05 Not 5. Certificate of Status Desired \$8.75 Ar Fee Rec 6. Election Campaign Financing Trust Fund Contribution Added to 8. This corporation owes or has paid the current year Intal Personal Property Tax due June 30. Yes	Applicable dditional quired May Be p Fees ngible
26 Suite, Apt. #, etc. Suite, Apt. #, etc. 27 City & State City & State Zip Country Zip 28 R. Name and Address of Current Registered Agent FRIED(ANDER, SHERRY 1301 \$. ANDREWS AVE.	30	5. Certificate of Status Desired	Applicable dditional quired May Be p Fees ngible
City & State City & State Zip Zip Country Z5 R. Name and Address of Current Registered Agent FRIEDLANDER, SHERRY 1301 \$. ANDREWS AVE.	30	Election Campaign Financing Trust Fund Contribution This corporation owes or has paid the current year Intal Personal Property Tax due June 30. Yes	vlay Be Fees ngible
Zip Country Zip Zip Country Zip 28 Represent Agent FRIEDLANDER, SHERRY 1301 \$. ANDREWS AVE.	30	Trust Fund Contribution Added to 8. This corporation owes or has paid the current year Intal Personal Property Tax due June 30. Yes	Fees ngible
Zip Country Zip 25 29 R. Name and Address of Current Registered Agent FRIEDLANDER, SHERRY 1301 \$. ANDREWS AVE.	30	Personal Property Tax due June 30. 🔲 Yes 🔲	-
FRIEDLANDER, SHERRY 1301 \$. ANDREWS AVE.	81 Name	10. Name and Address of New Registered Agent	No
, 1301 \$. ANDREWS AVE.	81 Name		
, 1301 \$. ANDREWS AVE.			
	82 Street Add	ress (P.O. Box Number is Not Acceptable)	
FT LAÜDERDALE FL 33316	83		
**************************************	84 City	FL 85 Zip C	ode
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statut office or register dyagoty, or both, in the State of Florida. Such change was a gent. I am familiar with and accept the obligations of, Section 607.0505. Florida. 	es, the above-named corpora	poration submits this statement for the purpose of changing its tion's board of directors. Thereby accept the appointment as re-	registered
agent. I am familiar with, and accept the obligations of, Section 607.0505, Flo	orida Statutes	11 - 100	
SIGNATURE O'ALKEL OT KULDVANDE	<i>N</i>	4/23/28	
	Registered Agent signature requi	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	S IAL 10
- Williams	1.1 TIPLE	Change	Addition
	1.2 NAME		
NAME STREET ADDRESS 1301 5. Andrews are	1.3 STREET ADDRESS		
CITY-ST-219 97. Lacederdale P/33316			
TITLE DELETE	2.1 TITLE	☐ Change	Addition
NAME	2.2 NAME		
STREET ADDRESS	2.3 STREET ADDRESS		
CITY-ST-ZIP	2.4 CITY-ST-ZIP		
TITLE DELETE	3.1 THLE	☐ Change	Addition
NAME	3.2 NAME		
STREET ADDRESS	3.3 STREET ADDRESS		
CITY-ST-ZIP	3.4. CITY - ST - ZIP		
TITLE DELETE	4.1 TITLE	Change	Addition
NAME :	4. 2 NAME		
STREET ADDRESS	4.3 STREET ADDRESS		
CITY-ST-ZIP T	4.4 CITY-ST-ZIP		
TITLE DELETE	5.1 TITLE	☐ Change	Addition
NAME .	5.2 NAME		
STREET ADDRESS	5.3 STREET ADDRESS		
CITY-ST-ZIP	5.4 CITY-ST-ZIP		
TITLE DELETE	6.1 TITLE	L Change	☐ Addition
NAME	6.2 NAME		
STREET ADDRESS	6.3 STREET ADDRESS		
CITY-ST-ZIP 14. I hereby certify that the information supplied with this filing does not qualify for	64 CITY-ST-ZIP		