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

PROFIT FLORIDA DEPARTMENT OF STATE FILED CORPORATION Katherine Harris ALHUAL REPORT Secretary of State 99 JUN 21 PH 1:50 DIVISION OF CORPORATIONS 1999 DOCUMENT # P9 7000002982 PUBLIC SAFETY INTERNATIONAL, INC. Principal Place of Business Maiting Address 8155 NW 335T PO BOX 015351 DO NOT WRITE IN THIS SPACE MIAMI FL. 33122 MAMI FL 33101-5351 3. Date Incorporated or Qualifed 01-06-97 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For Suite, Apt. #, etc. SAME AS ABOUR <u>65-0714974</u> Not Applicable \$8.75 Additional 5. Certifcate of Status Desired 22 Fee Required City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country 8. This corporation owes the current year Intangible 25 24 30 Personal Property Tax. DNo 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name HUTELMO TERRADES 82 Street Address (P.O. Box Number is Not Acceptable) 971 NW 139 AVE 83 MIAMI FL 33122 84 City 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 sulhorized 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 667.6505, Forida Statutes. Anterno TEPROES
Skyralure, typed or printed name of registered agent and title if applicable 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 274V9 TITLE **X** DELETE 1.1 TITLE Addition Change EDWARD PRESTON MAKE 12 NAME ANTELMO TERRADES 18530 EW 45 ST 1.3 STREET ADDRESS STREET ADDRESS 971 NW 134 AVE FT. LAUDERDAKE, FL. CITY-ST-7P MIAMI FL 33120 1.4 CITY-ST-ZIP DELETE Addition THLE 2.1 TITLE NATE 2.2 NAME STREET ADDRESS 2.3 STREET ADDRESS 100002918391--9 -06/29/39--**01634--00** CITY-ST-7P 2.4 CITY-ST-ZIP DELETE 3 S TITLE TI'LE 3.2 NAME ****150.00 ****150.00 0.336 3.3 STREET ADDRESS STREET ADUYESS 100002918391--9 CITY-ST-ZIF 3.4. CITY-ST-ZIP DELETE 4.1 TITLE HILL ******8.75 ******8.75 NAME 4. 2 NAME STREET ACCIDESS 4.3 STREET ADDRESS CITY-S! ZIP 4.4 CITY-ST-ZIP DELETE Change Addition SITTE TITLE NAME 5.2 NAME REET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-2IP CITY-SI-ZIP 61 TITLE DELETE Change Addition WE 6 2 NAME NAME 8.3 STREET ADDRESS \$TREE, LADORESS 6.4 CITY-ST-ZIP 14. The city 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 supplierrental 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 Biock 12 or Biock 13 or Biock 14 or Biock 15 or Biock

PUBLIC-SAFETY INTERNATIONAL

June 3, 1999

Florida Department of State Katherine Harris Secretary of State

Division of Corporations PO Box 6327 Tallahassee, Florida

Re: 1999 Corporation Filing Report

This is to inform you that I did not receive my Corporation Filing Forms for 1999. I contacted your division via telephone and was informed to submit the forms along with this explanation letter. If there are any additional question I can be contacted at 305 463 – 7099 or email aterrades@aol.com . Thank You.

Sincerely,

Antlemo Terrades

President