

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

FILED
May 01 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P97000067341 (2)
 1. Corporation Name
ADVANCED SECURITY COMMUNICATIONS, INC.



Principal Place of Business 8703 BISCAYNE BLVD MIAMI FL 33138-3341	Mailing Address 8703 BISCAYNE BLVD MIAMI FL 33138-3341
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 616 NW 167TH ST.		2a. Mailing Address 26 616 NW 167TH ST		3. Date Incorporated or Qualified 08/04/1997	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number 65-0806684	
23 City, State MIAMI FLORIDA		28 City, State MIAMI FLORIDA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
24 Zip 33169		25 Country USA		29 Zip 33169	
		30 Country USA		6. Election Campaign Financing... Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
g. Name and Address of Current Registered Agent				8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

VALENZANO, JOSEPH 8703 BISCAYNE BLVD MIAMI FL 33138-3341		616 NW 167TH ST. MIAMI, FL. 33169-5342		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 fee if applicable (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VALENZANO, JOSEPH	1.2 NAME	
STREET ADDRESS	8703 BISCAYNE BLVD	1.3 STREET ADDRESS	616 N.W. 167TH ST
CITY-ST-ZIP	MIAMI FL 33138-3341	1.4 CITY-ST-ZIP	MIAMI, FL 33169-5342
TITLE	STD <input type="checkbox"/> DELETE	2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COOK, RONALD	2.2 NAME	
STREET ADDRESS	8703 BISCAYNE BLVD	2.3 STREET ADDRESS	616 NW 167TH ST
CITY-ST-ZIP	MIAMI FL 33138-3341	2.4 CITY-ST-ZIP	MIAMI, FL 33169-5342
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	XCS/11
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	800002509778
STREET ADDRESS		6.3 STREET ADDRESS	-05/04/98--01088--004
CITY-ST-ZIP		6.4 CITY-ST-ZIP	***150.00

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: *[Signature]* **4-8-98 NONE**

CR2E034 (10/97)