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FILED
Apr 27 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000082456 (9)

1. Corporation Name

REMINGTON SECURITY CAMERA, INC.



Principal Place of Business

6073 NORTHWEST 167TH ST., C-5
MIAMI FL 33015

Mailing Address

6073 NORTHWEST 167TH ST., C-5
MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

09/23/1997

4. FEI Number

65-0784713

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

US

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEGAL INFORMATION SERVICES, INC.
1290 WESTON ROAD, STE. 300
WESTON FL 33326

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME MOSS, DAVID
STREET ADDRESS 6073 NORTHWEST 167TH ST., C-5
CITY-ST-ZIP MIAMI FL 33015

1.1 TITLE P ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS NO. 9 INDIAN CREEK ISLAND
1.4 CITY-ST-ZIP MIAMI BEACH FL 33154

TITLE D ☐ DELETE
NAME MONTELONGO, SYLVIA
STREET ADDRESS 6073 NORTHWEST 167TH ST., C-5
CITY-ST-ZIP MIAMI FL 33015

2.1 TITLE ST ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS NO. 9 INDIAN CREEK ISLAND
2.4 CITY-ST-ZIP MIAMI BEACH FL 33154

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE V ☐ Change ☒ Addition
3.2 NAME CONNORS, ROBERT M
3.3 STREET ADDRESS 4700 PIERCE STREET
3.4 CITY-ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 change is on an attachment with an address.

SIGNATURE:

[Signature]

4/12/98 3:05 PM 4501

CR2E034 (10/97)