Mailing Address

**PROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P97000085339

Principal Place of Business

THE ACCUTRACK SAFETY SYSTEMS CORP.

3029 NW 28TH AVENUE BOCA RATON FL 33434		3029 NW 28TH AVENUE BOCA RATON FL 33434				NOT WRITE IN T	'H S SPACE	·	
						3. Date Incorporated or 10/02/1997	Qualifed		
2. Principal P	lace of Business	2a. Mailing Address 26			4. FEI Number APPLIED FOR	65-078	— ا ← ا	pplied For lot Applicable	
Suite, Ar t. #, etc.		Suite, Apt. #, etc.						Acditional	
22		27				5. Certificate of Status D	esired	* '	Required
City & State		_ <del></del>	City & State			6. Electior Campaign F	inancing —	\$5.00	Nav Be
23		28				Trust Fund Contributi	- 11	• • • •	I to Fees
Zip	Country	Zip	Country			8. This corporation owe	s the current year	r Intangible	
24	25	29	30			Personal Property Ta		🗌 Yes	[]No
9. Name and Address of Current						10. Name and Address	of New Register	red Agent	
				81	Name				
NUS	SBAUM, HOWARD J ESQ.		00 84-40		D1 - 1 4 4 1	una (D.O. Bay Number in No	ot Assentable)		
30/29	9 NW 28TH AVENUE			82	Street Adult	ress (P.O. Box Number is No	ot Acceptable)		
BOC	CA RATON FL 33434			83					
				84	City			85 Zip	Cc de
					•			<u> </u>	
11. Pursuant	to the provisions of Se tions 607.050	2 and 607.1508, Florida Statu	ites, the at	oove-i	named corp	oration submits this stateme	nt for the purpose	e of changing its	s registered
office or i	to the provisions of Sections 607.050. registered agent, or both, in the State am familiar with, and accept the obligations of the colling of	tions of, Section 607.0505, Fi	orida Staty	ites.	ie coipora it	on's board by directors. Then	aby accept the ap		()()
SIGNATURE	// A > V/A/A	26-539	/-/4	0 6	and	JNUSTBAL	m	9-16-	- 4
	Signature, typed or printed nan for registered ager			Agent s	signature require	d when reinstating)	DATE	:	
12.		D DIRECTORS	13.			ADDITIC NS/CHANGE	S TO OFFICERS	Change	
TITLE	PD	☐ DELETE	1.1 TIT					☐ Change	L] Addition
NAME	RIEBE, ROBERT			ME					
STREET ADDRESS	3029 NW 28TH AVENUE		1.3 STREET ADDRESS		DDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434		1.4 CIT	TY-ST-	ZIP				
TITLE	VPD	☐ DELETE	2.1 TIT	ΠE				Change	☐ Addition
NAME	FURMAN, IRA 22		2.2 NA	ME					
STREET ADDRESS	3029 NW 28TH AVENUE		2.3 STREET ADDRESS		DORESS				}
CITY-ST-ZIP	BOCA RATON FL 33434		2.4 CF		ZiP				
TITLE	TD	☐ DELETE	3 1 TIT	TLE				Change	☐ Addition
NAME	MARANO, DOMINIC		3 2 NA	ME					
STREET ADDRESS	AAAA ABAL AATTI ALITAHIIT			REET A	DDRES\$				
CITY-ST-ZIP	BOCA RATON FL 33434		3.4. CI	ITY-ST-	ZIP				
TITLE	SD	☐ DELETE	4.1 TIT	rlE.				☐ Change	Addition
NAME	NUSSBAUM, HOWARD		4. 2 N	AME					
STREET ADDRESS	ARREST AND CONTINUES		4.3 ST	REETA	DDRESS				
CITY-ST-ZIP	BOCA RATON FL 33434		4.4 CI	TY-ST-	ZIP				
TITLE		☐ DELETE	5.1 TIT					Change	Addition
NAME			5.2 NA	ME					
STREET ADDRESS			5.3 ST	REETA	DDRESS				
CITY-ST-ZIP			5.4 CI	TY-ST-2	ZIP				-
TITLE		☐ DELETE	6.1 TD	TLE				☐ Change	. Addition
NAME			6.2 NA	ME					

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 indicate 1 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, with all other like empowered.

6.3 STREET ADDRESS

64 CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED Apr 27, 1999 8:00 am Secretary of State

04-27-1999 90193 008 \*\*\*150.00