

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

**FILED**  
**May 27 1998 8:00am**  
**Secretary of State**

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**, Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # **P97000085546**  
 1. Corporation Name  
**FIRE SYSTEMS INTERNATIONAL, CORP.**

Principal Place of Business Mailing Address  
**535 W 76<sup>ST</sup> HIALEAH, FLORIDA 33014** **SAME**

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 **535 W 76<sup>ST</sup>**  
 Suite, Apt #, etc.  
 22  
 City & State  
 23 **HIALEAH, FLA**  
 Zip Country  
 24 **33014** 25 **USA**

2a. Mailing Address  
 26 **535 W 76<sup>ST</sup>**  
 Suite, Apt #, etc.  
 27  
 City & State  
 28 **HIALEAH, FLA.**  
 Zip Country  
 29 **33014** 30 **USA**

3. Date Incorporated or Qualified  
**10/10/97**

4. FEI Number **NOT RECEIVED YET**  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

9. Name and Address of Current Registered Agent  
**ROQUE A. GOITIA**  
**535 W 76<sup>ST</sup>**  
**HIALEAH, FLORIDA 33014**

10. Name and Address of New Registered Agent  
 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 legal obligations of Sections 605, Florida Statutes.

SIGNATURE: *Roque A. Goitia* **OWNER - PRESIDENT** **4/24/98**

12. OFFICERS AND DIRECTORS

|                |                              |                                 |
|----------------|------------------------------|---------------------------------|
| TITLE          | <b>OWNER - PRESIDENT</b>     | <input type="checkbox"/> DELETE |
| NAME           | <b>ROQUE A. GOITIA</b>       |                                 |
| STREET ADDRESS | <b>535 W 76<sup>ST</sup></b> |                                 |
| CITY-ST-ZIP    | <b>HIALEAH, FLA. 33014</b>   |                                 |
| TITLE          |                              | <input type="checkbox"/> DELETE |
| NAME           |                              |                                 |
| STREET ADDRESS |                              |                                 |
| CITY-ST-ZIP    |                              |                                 |
| TITLE          |                              | <input type="checkbox"/> DELETE |
| NAME           |                              |                                 |
| STREET ADDRESS |                              |                                 |
| CITY-ST-ZIP    |                              |                                 |
| TITLE          |                              | <input type="checkbox"/> DELETE |
| NAME           |                              |                                 |
| STREET ADDRESS |                              |                                 |
| CITY-ST-ZIP    |                              |                                 |
| TITLE          |                              | <input type="checkbox"/> DELETE |
| NAME           |                              |                                 |
| STREET ADDRESS |                              |                                 |
| CITY-ST-ZIP    |                              |                                 |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                   |   |
|-------------------|---|
| 11 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 12 NAME           |   |
| 13 STREET ADDRESS |   |
| 14 CITY-ST-ZIP    |   |
| 21 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 22 NAME           |   |
| 23 STREET ADDRESS |   |
| 24 CITY-ST-ZIP    |   |
| 31 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 32 NAME           |   |
| 33 STREET ADDRESS |   |
| 34 CITY-ST-ZIP    |   |
| 41 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 42 NAME           | <b>900002538803</b>   |
| 43 STREET ADDRESS | <b>-05/28/98--01038--026</b>                                      |
| 44 CITY-ST-ZIP    | <b>***150.00</b>  |
| 51 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 52 NAME           |   |
| 53 STREET ADDRESS |   |
| 54 CITY-ST-ZIP    |   |
| 61 TITLE          | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| 62 NAME           |   |
| 63 STREET ADDRESS |   |
| 64 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; that I have read the report and executed 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 this filing.

SIGNATURE: *Roque A. Goitia* **ROQUE A. GOITIA** **4/24/98** **305-826-1810**

CR2E034 (10/97)