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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998 DOCUMENT # P9700096841 (6)

FILED May 27 1998 8:00am Secretary of State

AMERICAN SECURITY MANAGEMENT CORP. Principal Place of Business Mailing Address 3191 CORAL WY. STE 115-135 3191 CORAL WY, STE 115-135 MIAMI FL 33145 MIAMI FL 33145 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 11/10/1997 65-081387a 2. Principal Place of Business 2a. Mailing Address Applied For 21 Not Applicable Suite, Apt. #, etc. Suite. Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing 23 Trust Fund Contribution Added to Fees 28 Zφ Zio Country Country 8. This corporation owes or has paid the current year Intangible ☐ Yes □ No Personal Property Tax due June 30. 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MORALES, PABLO Name 3191 CORAL WY, STE 115-135 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33145** 83 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, or 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, typical or printed name of registered agent and title diapprication (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition 1.1 TITLE THLE MORALES, PABLO 1.2 NAME NAME 3191 CORAL WY, STE 115-135 STREET ADDRESS 1.3 STREET ADDRESS **MIAMI FL 33145** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Change Addition TITLE 21 TITLE SOSA, MANUEL NAME 2.2 NAME 3191 CORAL WY, STE 115-135 2.3 STREET ADDRESS STREET ADDRESS MIAM! FL 33145 OITY-ST-ZIP 2. 4 CITY-ST-7/P DELETE Change Addition TITLE 3.1 TITLE NAME MARTIN, MADY 3.2 NAME 3191 CORAL WY, STE 115-135 3.3 STREET ADORESS STREET ADDRESS MIAMI FL 33145 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE ALVAREZ, JOSE NAME 4. 2 NAME 3191 CORAL WY, STE 115-135 4.3 STREET ADDRESS STREET ADDRESS MIAMI FL 33145 CITY-ST-ZIP 4.4 CITY-ST-ZIP Addition DELETE Change TITLE 5.1 TITLE NAME 5.2 NAME 53 STREET ADDRESS STREET ADDRESS 5.4 City - St - ZiP CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 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 chapted, promise a statement with an address.

SIGNATURE: WHO WOON

4-20-98