SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P97000097810 (0)

1. Corporation	ECHNOLOGY SECURITY, IN	NC.		
Principal Place of Business		Mailing Address		
1735 JEFFERSON AVENUE MIAMI BEACH FL 33139		1735 JEFFERSON AVENU	E	· ·
		MIAMI BEACH FL 33139		DO NOT WRITE IN THIS 8PACE
				3. Date Incorporated or Qualified
				11/14/1997
2. Principal Place of Business		2a, Mailing Address		4. FEI Number Applied For
21		26		65~081/716 Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State		City & State		Fee Required
23		28		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Registered Agent
	ITIN, MARTIN		81 Name	
1735 JEFFERSON AVENUE MIAMI BEACH FL 33139			82 Street A	address (P.O. Box Number is Not Acceptable)
MIAMI BEACH FL 33139			83	
			84 City	FL 85 Zip Code
11. Pursuan office or agent. I	t to the provisions of sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was pations of, section 607.0505, F	es, the above-named co authorized by the corpo lorida Statutes.	rporation submits this statement for the purpose of changing its registered tration's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered age	not and title it annivenie (A	OTE: Registered Agent signature	grequired when reinstating) DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PRESIDENT	DELETE	1.1 TITLE	Change Addition
NAME	MARTIN MARTIN		1.2 NAME	
STREET ADDRESS 1735 Jefferson Avenue		1.3 STREET ADDRESS		
CITY-ST-ZIP	Miami Beach , F/ 331		1.4 CITY-ST-ZIP	
TITLE	VICE PRESIDENT	DELETE	2.1 TITLE	L Change Addition
NAME	MARTIN MARTIN		2.2 NAME	
STREET ADDRESS	10440 6W 58 ST.		2.3 STREET ADDRESS	•
CITY-ST-ZIP	MIRM', F1 83173		2 4 CITY-ST-ZIP	
NAME		L] DELETE	3.2 NAME	Change Addition
STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS	
CITY-ST-ZIP			3.4 CITY-ST-ZIP	
TITLE		DELETE	4.1 TITLE	Change Addition
NAME		Lad Occurs	4.2 NAME	La Charge [] Addaon
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	*
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELET E	6.1 TITLE	Change Addition
NAME			6.2 NAME	

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.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

WA WARTIN WARTEN VE

9/28/48

305 447-1917

FILED

Oct 07 1998 8:00am

Secretary of State

JAZE034 (5/98)