

COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.  
AMOUNT DUE ON OR BEFORE 09/15/99: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**Sep 07, 1999 8:00 am**  
**Secretary of State**

09-07-1999 90005 024 \*\*\*150.00

DOCUMENT # **P98000012966**

PHOENIX SECURITY GROUP, INC.

Principal Place of Business

1 LANTANA LANE  
TAMARAC FL 33321

Mailing Address

7064 LANTANA LANE  
TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/09/1998

4. FEI Number

050816721

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 the current year  
Intangible Personal Property. ☐ Yes ☐ No

Principal Place of Business

2124 N.E. 123rd St.

2a. Mailing Address

26 2124 N.E. 123rd St.

Suite, Apt. #, etc.

Suite 212

Suite, Apt. #, etc.

27 Suite 212

City & State

North Miami, FL

City & State

28 North Miami, FL

Zip

33181

Country

25 USA

Zip

29 33181

Country

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GENTILE, ANTHONY  
7064 LANTANA LANE  
TAMARAC FL 33321

81 Name

Anthony Negri

82 Street Address (P.O. Box Number is Not Acceptable)

2124 N.E. 123rd Street

83 Suite 212

84 City North Miami

FL

85 Zip Code

33181

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.

NATURE

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

8/30/99

OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME		1.2 NAME	
1.3 STREET ADDRESS		1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP		1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		2.2 NAME	
2.3 STREET ADDRESS		2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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5.1 TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		5.2 NAME	
5.3 STREET ADDRESS		5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		6.2 NAME	
6.3 STREET ADDRESS		6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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, changed or on an addition with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

8/30/99

Date

Daytime Phone #

CR2E034 (5/99)

# Phoenix Security Group, Inc.

Phone 305-981-2120

Fax 305-981-9790

2124 N.E. 123rd Street - Suite 212 - North Miami, FL 33181

P98600012966  
612726-9000524

8/27/99

Florida Department of State  
Division of Corporations  
Annual Reports Filings  
P.O. Box 1500  
Tallahassee, FL 32302

## RE: PHOENIX SECURITY GROUP, INC.

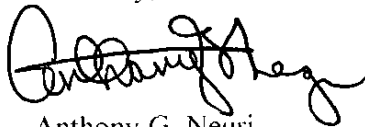
To Whom It May Concern,

Please be advised that this our first year of being in business in the State of Florida therefore we were unaware of the annual report filing.

In addition we did not receive the first notice to file and as I indicated above we were unaware of this filing procedure.

It would be greatly appreciated if the late fee can be waived based on the circumstances I have indicated above. Thank You.

Sincerely,



Anthony G. Negri