

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

PROFIT
CORPORATION
ANNUAL REPORT
1999



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

FILED
Jun 23, 1999 8:00 am
Secretary of State

06-23-1999 90005 028 ***150.00

DOCUMENT # P98000065122

1. Corporation Name

Securityline Distributors, Inc.

Principal Place of Business

7205 NW 44th St.
Miami, FL 33166

Mailing Address

7205 NW 44th St
Miami, FL 33166

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07-24-98

4. FEI Number

☒ Applied For
☐ Not Applicable

2. Principal Place of Business

2a. Mailing Address

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

25

Zip

Country

30

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 Tax. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

81 Name

Prodelo Rios

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

7925 NW 12th St #318

83

84 City

Miami

FL

85 Zip Code

33166

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 obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Prodelo Rios 5-07-99 305-477-4680

CR2F034 (11/98)

SECURITY LINE DISTRIBUTORS INC
7205 NW 44TH STREET
MIAMI, FL 33166

MAY 31, 1999

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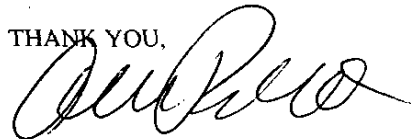
FL DEPT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

REF: SECURITY LINE DIST. INC
DOC. # P98000065122

TO WHOM IT MAY CONCERN:

WE ARE WRITING TO YOUR OFFICES IN ORDER TO NOTIFY YOU THAT WE NEVER
RECEIVED OUR CORPORATE ANNUAL REPORT. WE ASK THAT YOU PLEASE ADJUST YOUR
RECORDS WITH THE CORRECT ADDRESS AND INFORMATION. WE HAVE ENCLOSED A
CHECK FOR \$150.00 HOPING THAT YOU FORGIVE US BUT WE NEVER RECEIVED THE
ORIGINAL ANNUAL REPORT. YOUR PROMPT ATTENTION WILL BE GREATLY
APPRECIATED.

THANK YOU,



ARENA J PRADO, CPA