## 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

## DOCUMENT # P98000076245

FIRE BRIGADE ALARM SERVICES, INC.

Principal Place of Business

Mailing Address

SARASOTA FL 34233

## FILED Mar 01, 1999 8:00 am **Secretary of State**

03-01-1999 90064 003 \*\*\*150.00



5777 BENEVA RD. S. 5777 BENEVA RD. S. SARASOTA FL 34233 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualifed 09/01/1998 4. FEI Number Applied For 2a. Mailing Address 2. Principal Place of Business 6535 Goldfince Steel 0841885 11535 Goldfinch St U5 Not Applicable \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 \$5.00 May Be City Barason FZ City & State 6. Election Campaign Financing arasota Trust Fund Contribution Added to Fees Country 8. This corporation owes the current year Intangible ÜSA □No Personal Property Tax. 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name PREWETT, DANIEL L Street Address (P.O. Box Number is Not Acceptable) 5777 BENEVA RD. S. SARASOTA FL 34233 83 Zip Code 85 84 City 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 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change DELETE Tres /D 11TITLE TITLE PERNA. TODD 1.2 NAME NAME 6535 GOLDFINCH ST. 1.3 STREET ADDRESS STREET ADDRESS SARASOTA FL 34241 1.4 CITY-ST-ZIP CITY-ST-ZIP Carmen Person Soc/ 2 6535 Gold finch ST Change Addition DELETE 2.1 TITLE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS Serasta Le 34241 2.4 CITY-ST-ZIP CITY-ST-ZIP ☐ DELETE ☐ Change ☐ Addition 3.1 TITLE TITLE 32 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3 4. CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition DELETE 4.1 TITLE TITLE 4.2 NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TIDE TITLE 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CITY-ST-ZIP

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:

Daytime Phone I

CR2E034 (11/98)