## 2003 FOR PROFIT CORPORATION

## **FILED** Jan 22, 2003 8:00 am **UNIFORM BUSINESS REPORT (UBR) Secretary of State** P98000092762 DOCUMENT # 1. Entity Name 01-22-2003 90142 017 \*\*\*158.75 HURRICANE SECURITY, INC. Principal Place of Business Mailing Address 17301 NW 77TH COURT 17301 NW 77TH COURT HIALEAH FL 33015 HIALEAH FL 33015 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. ☐ CHECK HERE IF MAKING CHANGES City & State 4. FEI Number Applied For City & State 65-0875690 Not Applicable Zip Country Country Zip \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent BENTLEY, RONALD Street Address (P.O. Box Number is Not Acceptable) 17301 NW 77TH COURT HIALEAH FL 33015 Zip Code City 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both; in the State of Florida. I am familiar with, and accept SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing **\$5.00** May Be After May 1, 2003 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10 11. ☐ Addition TITI F ☐ Delete TITLE Change NAME BENTLEY, RONALD NAME STREET ADDRESS 17301 NW 77TH COURT STREET ADDRESS HIALEAH FL 33015 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE NAME BENTLEY, JOHN R MAME STREET ADDRESS 17301 NW 77TH COURT STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP HIALEAH FL 33015 ☐ Addition TITLE ST ☐ Delete TITLE Change NAME BENTLEY, MARGARET N NAME STREET ADDRESS STREET ADDRESS 17301 NW 77TH COURT CITY-ST-7IP CITY-ST-ZIP HIALEAH FL 33015 ☐ Addition TITLE ☐ Delete TITLE Change BENTLEY, RHONDA C NAME NAME STREET ADDRESS 17301 NW 77TH COURT STREET ADDRESS CITY-ST-ZIP HIALEAH FL 33015 CITY-ST-ZIP ☐ Change ☐ Delete ☐ Addition

12. 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 report or supplemental 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 10 or Block 11 if

NAME

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TIT) F

NAME

☐ Delete

Change

☐ Addition