PROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE

Kathering viarris

Secretary of State

DIVISION OF CORPORATIONS

Apr 07, 1999 8:00 am Secretary of State

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DOCUMENT # P98000101278
SECURITY CORPORATION OF AMERICA

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Principal Place of Business Mailing Address 7000 SW 97TH AVE., SUITE 116 7000 SW 97TH AVE. SUITE 118 MIAME FL 33173 MIAMI FL 33173 DO NOT WRITE IN THIS SPACE 3. Date incorporated or Qualifed 11/30/1998 5-0880572 Applied For_ 2. Principal Place of Business 2a. Mailing Address Not Applicable 26 21 \$8.75 Additional Sulte, Apt. #, etc. Suite, Apt, #, etc. 5, Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 8. Election Campaign Financing City & State Added to Fees **Trust Fund Contribution** 23 Country 8. This corporation owes the current year Intangible Country Zip Zip ⊠No Yes Personal Property Tax. 30 29 25 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name RODRIGUEZ, ARMANDO Street Address (P.O. Box Number is Not Acceptable) 62 6121 SW 114TH AVE. MIAMI FL 33173 83 Zip Code 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 charging 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 (Wht), and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE (NOTE: Registered Agent alguature required when reinstating) e of registered agent and title if spp8 22E034.(11/98 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change ☐ Addition Armando Rudriguez **□** DELETE 1.1 TITLE TITLE 1.2 NAME NAME 6121 SU 114 AVE 1.3 STREET ADDRESS STREET ACCRESS MIAN; FI 33/33 1.4 CITY-ST-ZIP CITY-ST- DP ☐ Addition Change DELETE 21 IIILE TITLE 22 NAME NAME 2.3 STREET ADDRESS STREET ADDRESS 2.4 CITY-ST-ZIP CITY-ST-ZP Addition Change DELETE 3.1 TITLE TILE 3.2 NAME NAME 13 STREET ADDRESS STREET ADDRESS 3.4. CITY-ST-ZIP CITY-ST-ZP Change ☐ Addition DELETE 4.1 TITLE TILE 4, 2 NAME NAME 4,3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZP CITY-ST- 3P Change Addition DELETE 5.1 TITLE TILE 5.2 NAME NAVE A 3 STREET ADDRESS STREET ADDRESS SACITY-ST-79 CTTY-ST- ZP Addition Change 8,1 TITLE DELETE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 6.4 CFTY-ST-ZSP

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 inclicated on this annual report or supplemental ennual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 Bitick 12 or Block 13 if changed, or or as all a giment with an address, with all other like empowered.

SIGNATURE: _

SINGUES REQUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR