

FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

FILED

02 JAN -3 AM 8:52

SECRETARY OF STATE
TALLAHASSEE, FLORIDADOCUMENT # **P99000107141**

1. Entity Name

Monarch Security Systems

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business

2746 S. W. 11th. Street

3. Mailing Address

SAME

Suite, Apt. #, etc.

Suite, Apt. #, etc.

DO NOT WRITE IN THIS SPACE

City & State
Miami, FL

City & State

4. FEI Number
65-0969945

Applied For

Not Applicable

33135

Country
USA

Zip

Country

5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required

33135

DO NOT WRITE IN THIS SPACE

7. Name and Address of Current Registered Agent

Name

Justino Celorio

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

2746 S. W. 11th. Street

City Miami

FL

Zip 33135

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.

SIGNATURE

Justino Celorio

Justino Celorio

Jan. 1/2002

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

(NOTE: Registered Agent signature required when resigning)

DATE

9. This corporation is eligible to satisfy its intangible
Tax filing requirement and elects to do so.
(See criteria on back) ☐

January 1 - May 1: Fee is \$150.00

After May 1: Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Department of State

10. Election Campaign Financing
Trust Fund Contribution. ☐\$5.00 May Be
Added to Fees

11. OFFICERS AND DIRECTORS

TITLE	Justino Celorio
NAME	President/Secretary/Treasurer
STREET ADDRESS	2746 S. W. 11th. Street
CITY-ST-ZIP	Miami, FL 33135

TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

100004792391
-01/23/02--01080--001
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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)(f), 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 807, Florida Statutes; and that my name appears in Block 11 or on an attachment with an address, with all other like empowered.

SIGNATURE: *Justino Celorio*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR*January 1 2002*
DATE

Daytime Phone #

CR2E034B (2/01)