

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Murphree
Secretary of State
TALLAHASSEE, FLORIDA 32304-0001

DOCUMENT # **S22312**

(0)

ST. AUG CORP.

95 MAY 23 AM 10:15

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Previous Name of Corporation		2a. Mailing Address		3. Date last incorporated or qualified		3a. Date of Last Report	
P O BOX 402486 MIAMI BCH FL 33140		P O BOX 402486 MIAMI BCH FL 33140		01/03/1991		05/01/1994	
2. Previous Number of Members		2a. Mailing Address		4. FEI Number		Applied For	
21		26		65-0238686		Not Applicable	
22. State of Incorporation		27. State of Incorporation		5. Certificate of Status Desired		\$8.75 Additional Fee Required	
22		27		☐		☐	
23. City & State		28. City & State		6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
23		28		☐		☐	
24. Name		25. Authority		29. Name		30. Authority	
24		25		29		30	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
KIPNIS, THEODORE 115-4TH DIJUDO TER MIAMI BEACH FL 33139				81. Name			
				82. Street Address (P.O. Box Number is Not Acceptable)			
				83. City			
				84. State			
				85. Zip Code			
				FL			

11. Pursuant to the provisions of Sections 607.05(2), and 607.15(8), Florida Statutes, this 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 Sections 607.05(2), Florida Statutes.

SIGNATURE

(Signature of Registered Agent or Registered Agent's Representative)

(Signature of President or Officer of Corporation)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS	
NAME	DP KIPNIS, THEODORE 115-4TH DIJUDO TER MIAMI BCH FL	1. NAME	☐ Change ☐ Addition
STREET ADDRESS		2. NAME	☐ Change ☐ Addition
CITY		3. NAME	☐ Change ☐ Addition
STATE		4. NAME	☐ Change ☐ Addition
ZIP CODE		5. NAME	☐ Change ☐ Addition
NAME		6. NAME	☐ Change ☐ Addition
STREET ADDRESS		7. NAME	☐ Change ☐ Addition
CITY		8. NAME	☐ Change ☐ Addition
STATE		9. NAME	☐ Change ☐ Addition
ZIP CODE		10. NAME	☐ Change ☐ Addition
NAME		11. NAME	☐ Change ☐ Addition
STREET ADDRESS		12. NAME	☐ Change ☐ Addition
CITY		13. NAME	☐ Change ☐ Addition
STATE		14. NAME	☐ Change ☐ Addition
ZIP CODE		15. NAME	☐ Change ☐ Addition

14. I, the undersigned, certify that the information supplied with this filing is accurately furnished and does not qualify for the exemption stated in Sections 119.07(4), 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 on Block 12 or Block 13 of this filing, or on an attached form with an address.

SIGNATURE:

(Signature and Typed or Printed Name of Signing Officer or Director)

5/18/95 305-672-2058

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1995



FLORIDA DEPARTMENT OF STATE
Barbara H. Markham
Secretary of State
Tallahassee, Florida 32399-0001

DOCUMENT # S22451

(6)

J.H. GLASSBERG, INC.

Principal Office Address
100 NE 30TH ST
POMPANO BCH. FL 33064

Mailing Address
100 NE 30TH ST
POMPANO BCH. FL 33064

(DO NOT WRITE IN THESE SPACES)

2. Principal Office Address

2a. Mailing Address

3. Date Registered or Qualified
12/31/1990

3a. Filing Date
01/25/1994

4. FCI Number
65-0234581

Applied Fee
Not Applicable

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 has liability for alternative tax under Florida Statute

X

21. 422 NE 306 Ave

26. 422 NE 6 ave

22. State Address

27. State Address

23. Deerfield Bch, FL

28. Deerfield, Bch

24. 33441

29. 33441

30. 33441

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GLASSBERG, J.H.
100 NE 30TH ST
POMPANO BCH. FL 33064

81. Name
Glassberg J.H.

82. Street Address, P.O. Box Number, Not Applicable
422 NE 6 ave

83. City

84. City
Deerfield Bch

85. Zip Code
33441

11. I, the undersigned, being the president or secretary of the corporation, do hereby certify that the information furnished in this statement is true and correct to the best of my knowledge and belief, and that I am a resident of the State of Florida, and that I am duly qualified to act as president or secretary of the corporation, and that I am duly qualified to act as president or secretary of the corporation, and that I am duly qualified to act as president or secretary of the corporation.

SIGNATURE

12. OFFICE OF THE SECRETARY OF STATE
P
GLASSBERG, J.H.
100 NE 30TH ST
POMPANO BCH. FL

13. ADDITIONAL CHANGE
P
Glassberg J.H.
422 NE 6 ave
Deerfield Bch FL 33441

14. I, the undersigned, do hereby certify that the information supplied with the filing is voluntarily furnished and does not qualify for the exemption stated in Section 190.01(1)(b), Florida Statutes, and that I am a resident of the State of Florida, and that I am duly qualified to act as president or secretary of the corporation, and that I am duly qualified to act as president or secretary of the corporation, and that I am duly qualified to act as president or secretary of the corporation.

SIGNATURE: J.H. Glassberg 5-19-95 305574 0222
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S23183

(4)

1. Corporation Name

SOUTH GATE SECURITY, INC.

Principal Place of Business

471 23RD ST., NW
NAPLES FL 33964-1823

Mailing Address

471 23RD ST., NW
NAPLES FL 33964-1823

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/07/1991
3a. Date of Last Report 02/25/1994

4. FET Number 65-0235932
Applied Fee Not Applicable

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

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

8. This corporation has liability for intangible tax under S. 199.035, Florida Statutes. ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21. State App # etc

27. State App # etc

22. City & State

28. City & State

23. City

29. City

24. City

25. City

29. City

30. City

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HARTMAN, PAUL
471 23RD ST., NW
NAPLES FL 33964

81. Name

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

83.

84. City

FL

85. Zip Code

11. Pursuant to the provisions of Sections 607.08(2), 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 this appointment as registered agent. I am familiar with and I accept the duties imposed by Section 607.08(2), Florida Statutes.

SIGNATURE

(Print or type name and title of registered agent or officer or director)

(Print or type name and title of registered agent or officer or director)

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12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS ONLY

1. NAME	D HARTMAN, PAUL
2. STREET ADDRESS	471 23RD ST. NW
3. CITY	NAPLES FL
4. NAME	D HAZELL, KENNETH J.
5. STREET ADDRESS	471 23RD ST. NW
6. CITY	NAPLES FL
7. NAME	
8. STREET ADDRESS	
9. CITY	
10. NAME	
11. STREET ADDRESS	
12. CITY	
13. NAME	
14. STREET ADDRESS	
15. CITY	
16. NAME	
17. STREET ADDRESS	
18. CITY	
19. NAME	
20. STREET ADDRESS	
21. CITY	

1. NAME	V/S	☒ Change ☐ Addition
2. STREET ADDRESS		
3. CITY		
4. NAME	P/T	☒ Change ☐ Addition
5. STREET ADDRESS		
6. CITY		
7. NAME		☐ Change ☐ Addition
8. STREET ADDRESS		
9. CITY		
10. NAME		☐ Change ☐ Addition
11. STREET ADDRESS		
12. CITY		
13. NAME		☐ Change ☐ Addition
14. STREET ADDRESS		
15. CITY		
16. NAME		☐ Change ☐ Addition
17. STREET ADDRESS		
18. CITY		
19. NAME		☐ Change ☐ Addition
20. STREET ADDRESS		
21. CITY		

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 199.035(1)(b), 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 on the certificate that is attached or on file for of this corporation or the name or the firm empowered to use the report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 or Block 14 (as changed) on an attachment with an address.

SIGNATURE:

Kenneth J. Hazell
SIGNATURE AND TYPED OR PRINTED NAME OF BOARD MEMBER OR DIRECTOR

Kenneth J. Hazell 5-16-95/513-863-2835

APPROVED
AND
FILED

55 MAY 20 11:15:22

SECRETARY OF STATE
TALLAHASSEE, FLORIDA