FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT 1998 **DOCUMENT #**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

(1)

FILED Apr 28 1998 8:00am Secretary of State

S A SE	ECURITY CONSULTANTS, I	INC.			
Principal Plac	e of Business	Mailing Address		- L INDIININ AND FITH DIRIA CHAN DIRIT DIRI DIRI DIRIT AL	ON ANDIT DIGIT DIGIT DIBIT CER:
3191 CORAL WAY 3191 CORAL WAY					
SUITE 405		SUITE 405			
MIAMI FL 33145		MIAMI FL 33145		DO NOT WRITE IN THIS SPACE	
US		US		3. Date Incorporated or Qualified	
. Delegand D	logs of Divisions	On Mailing Address		02/26/1991 4. FEI Number	I A garage
—	lace of Business	2a. Mailing Address			Applied For
Sulte. Apt. #, etc.		Suite, Apt. #, etc.		NOT APPLICABLE	Not Applicable
22	π, θιο.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25	29 3	<u> </u>	Personal Property Tax due June 30.	Yes No
<u></u>	9. Name and Address of Curre		<u> </u>	10. Name and Address of New Registered	
HA	USER, JAMES A PA		81 Name		
3191 CORAL WAY			82 Street Addr	ess (P.O. Box Number is Not Acceptable)	
SUITE 405		OZ SUBBLAGUI	ess (F.O. DOX NUMBER IS NOT Acceptable)		
	AMI FL 33145		83		
			84 City	F	B5 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the above-named corp	oration submits this statement for the purpose	of changing its registered
l office or r	egistered agent, or both, in the Stat m familiar with, and accept the oblid	e of Florida. Such change was aut	lborized by the corporati	ion's board of directors. I hereby accept the ag	pointment as registered
	an landing with contracting the cont	gationa of occition do 1.0000, Thom	od blatatos.		
SIGNATURE	Signature typed or printed name of registered as	jent and title if applicable [NOTE: F	Registered Agent signature require	ed when reinstating) DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	HAUSER, JAMES A		1.2 NAME		
STREET ADDRESS	3191 CORAL WAY, 405		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TITLE	P	☐ DELETE	2.1 TITLE		Change Addition
NAME	Nasser, Gouda		2.2 NAME		
STREET ADDRESS	3191 CORAL WAY, 405		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TITLE	VP	☐ DELETE	3.1 TITLE		Change Addition
NAME	HAUSER, JAMES A		3.2 NAME		
STREET ADDRESS	3191 CORAL WAY, 405		3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			44 CHY-ST-ZIP		
TITLE	•	☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			54 CITY-ST-ZIP		~
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		ļ
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP			64 CITY-ST-ZIP		
44 hazabir	antifu that the information amenited t	with this filing dose and avalify for t	the avamation dated in t	Section 110 07/3\(\text{ii}\) Florida Statutac I further \(\text{i}\)	northly that the information

wal report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in address. indicated on this armual report or sup officer or director of the corporation Block 12 or Block 13 if changes