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

## FILED Apr 13 1998 8:00am **PROFIT** LLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State \* DIVISION OF CORPORATIONS 1998 DOCUMENT # SCEURITY Systems INI Principal Place of Business 119371 SW 118 COORT MIAMI FLA DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 2. Principal Place of Business 28. Mailing Address 4. FEI Number Applied For WYN NIW Not Applicable Suite, Apt. #. etc. Suite, Apt. #, etc. \$8.75 Additional Certificate of Status Desired City & State Fee Required 22 City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Country Country 8. This corporation owes or has paid the current year Intangible USA Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ROD STRUDMAN 19371 S.W. 118 COORT MIAMIFL 33177 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 City Zip Code 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 changing its registered office or registered agent, or both, in the State of Horida. 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, Section 607.0505, Florida Statutes. SIGNATURE (NOTE Registered Agent's gualant required when reinstaing) OFFICERS AND DIRECTORS 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE TOLE 1.1.7(1) F Change ☐ Addition ROD STOUDMON NAME 1.2 NAME 119371 SW 118 COORT STREET ADDRESS 1 3 STREET ADDRESS MIAMI 1.4 CHY-ST-ZIP CITY-S1-70P DELETE TITLE 2111111 Change ☐ Addition NAME 2.2 NAMI STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - 7tl 2 4 CITY - ST - 7/P DELETE THUE 3.1 Tille Change Addition NAME 3.2 NAMI STREET ADDRESS 3.3 STREET ADDRESS CITY - ST - ZiL 3.4 CITY-\$1-ZIP TIME DELETE 4.1 THLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CHY - ST - 7IP DELETE 10000248714<sup>Change</sup> TITLE 5.1.10U.E ☐ Addition NAME 5.2 NAMI -04/14/98--01001--002 STREET ADDRESS 5.3 STREET ADDRESS \*\*\*150.00 5.4 City St-ZiP DELETE THEE 6 1 HHT ☐ Change ☐ Addition NAME G 2 NAME

6.3 STRLET ADDRESS

6.4 CHY - \$1 - 7IP 14. Thereby certify that the information supplied with this tiling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplied entail annual report is true and accurate and Inat 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

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

Block 12 or Block 13 if changed, or on an attachment with an address.

CR2E034 (10/97