**FILE NOW: FILING FEE AFTER MAY 1 IS $2**

**5.00**

PROFIT CORPORATION ANNUAL REPORT

**1996**

FLORIDA DEPARTMEN
Sandra B. Mor
Secretary of S
DIVISION OF CORPO

F STATE

TIONS

DOCUMENT # **S63280** **(9)**

1. Corporation Name

**LAW ENFORCEMENT TRAINING SYSTEMS, INC.**

| Principal Place of Business | Mailing Address |
|---|---|
| **9751 N.W. 24 COURT**<br>**SUNRISE FL 33322** | **9751 N.W. 24 COURT**<br>**SUNRISE FL 33322** |

| | |
|---|---|
| 3. Date Incorporated or Qualified: **07/01/1991** | 3a. Date of Last Report: **01/27/1995** |
| 4. FEI Number: **65-0279078** | ☐ Applied For ☐ 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 intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No | |

| 2. Principal Place of Business | 2a. Mailing Address |
|---|---|
| 21 | 26 |
| Suite, Apt. #, etc.<br>22 | Suite, Apt. #, etc.<br>27 |
| City & State<br>23 | City & State<br>28 |
| Zip / Country<br>24 / 25 | Zip / Co<br>29 / 30 |

9. Name and Address of Current Registered Agent

**MOSS, RICHARD S.**
**9751 N.W. 24TH CT.**
**SUNRISE FL 33322**

10. Name and Address of New Registered Agent

| | |
|---|---|
| 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 607.0502 and 607.1508, Florida Statutes, the a... or registered agent, or both, in the State of Florida. Such change was authorized by th... familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

...ve named corporation submits this statement for the purpose of changing its registered office ...corporation's board of directors. I hereby accept the appointment as registered agent. I am

SIGNATURE ... (Signature, typed or printed name of registered agent and title, if applicable) (NOTE: Registe... (Agent signature required when filing) DATE

12. OFFICERS AND DIRECTORS

| | | |
|---|---|---|
| TITLE | D | ☒ DELETE |
| NAME | RUBINO, STEVEN | |
| STREET ADDRESS | 7850 PETER RD., SUITE F102 | |
| CITY-ST-ZIP | FT LAUDERDALE FL | |
| TITLE | D | ☐ DELETE |
| NAME | MOSS, RICHARD S. | |
| STREET ADDRESS | 9751 N.W. 24 COURT | |
| CITY-ST-ZIP | SUNRISE FL | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| | | |
|---|---|---|
| 1 | TITLE | ☐ Change ☐ Addition |
| 1.2 | NAME | |
| 1.3 | STREET ADDRESS | |
| 1.4 | CITY-ST-ZIP | |
| 2 | TITLE | ☐ Change ☐ Addition |
| 2.2 | NAME | |
| 2.3 | STREET ADDRESS | |
| 2.4 | CITY-ST-ZIP | |
| 3 | TITLE | ☐ Change ☐ Addition |
| 3.2 | NAME | |
| 3.3 | STREET ADDRESS | |
| 3.4 | CITY-ST-ZIP | |
| 4 | TITLE | ☐ Change ☐ Addition |
| 4.2 | NAME | |
| 4.3 | STREET ADDRESS | |
| 4.4 | CITY-ST-ZIP | |
| 5 | TITLE | ☐ Change ☐ Addition |
| 5.2 | NAME | |
| 5.3 | STREET ADDRESS | |
| 5.4 | CITY-ST-ZIP | |
| 6 | TITLE | ☐ Change ☐ Addition |
| 6.2 | NAME | |
| 6.3 | STREET ADDRESS | |
| 6.4 | CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and ... certify that the information indicated on this annual report or supplemental annual repor... oath, that I am an officer or director of the corporation or the receiver or trustee empow... appears in Block 12 or Block 13 if changed, or on an attachment with an address ... does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further ... true and accurate and that my signature shall have the same legal effect as if made under ...red to execute this report as required by Chapter 607, Florida Statutes; and that my name

**SIGNATURE:** Richard S. Moss Richard S. Moss 16 Feb 96 (954)746-5387

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E034 (12/95)