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May 15 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # S73726 (9)

1. Corporation Name
24-HOUR SECURITY, INC.

Principal Place of Business

1515 S FEDERAL HWY
BOCA RATON FL 33432
US

Mailing Address

1515 S FEDERAL HWY
BOCA RATON FL 33432-7450
US



3. Date Incorporated or Qualified 08/15/1991
3a. Date of Last Report 05/01/1996

2. Principal Place of Business 21 7040 W. Palmetto Park Rd. 2a. Mailing Address 26 7040 W. Palmetto Park Rd.
Suite, Apt. #, etc. #4-523 Suite, Apt. #, etc. #4-523

23 BOCA RATON 28 BOCA RATON
City & State City & State
Zip 33433-3407 Country Palm Beach 29 33433-3407 30 Palm Beach
Country

24 33433-3407 25 Palm Beach 29 33433-3407 30 Palm Beach
Country

9. Name and Address of Current Registered Agent
CULLEN, RICHARD
1515 S FEDERAL HWY
BOCA RATON FL 33432
ADDRESS CHANGE ONLY

10. Name and Address of New Registered Agent
81 Name RICHARD CULLEN
82 Street Address (P.O. Box Number is Not Acceptable) 7040 WEST PALMETTO PARK RD. #4-523
83
84 City BOCA RATON FL 85 Zip Code 33433-3407

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 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, Section 607.0505, Florida Statutes.

SIGNATURE [Signature] 4/28/97
Signature, typed or printed name of registered agent and not applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
1.1 TITLE D
1.2 NAME CULLEN, RICHARD
1.3 STREET ADDRESS 1515 S FEDERAL HWY
1.4 CITY-ST-ZIP BOCA RATON FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing 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 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: [Signature] 561-347-7213 4/28/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E034 (9/96)