FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 MAY 31 AM 9:43

DOCUMENT # **V06273** **(9)**

1. Corporation Name

AFFORDABLE ALARMS AND ELECTRICAL SERVICES AND CO NTRACTING CORPORATION

Principal Place of Business	Mailing Address
1253 UNIVERSITY DR. #339 CORAL SPRINGS FL 33071 US	1253 UNIVERSITY DR. #339 CORAL SPRINGS FL 33071 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **01/14/1992**
3a. Date of Last Report: **10/24/1994**

2. Principal Place of Business — 21:
2a. Mailing Address — 26:
Suite, Apt. #, etc. — 22 / 27:
City & State — 23 / 28:
Zip — 24 / 29: Country — 25 / 30:

4. FEI Number: **65-0310306** ☐ 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

9. Name and Address of Current Registered Agent

MCDONOUGH, MICHAEL R.
63 ANN LEE LANE
TAMARAC FL 33319

10. Name and Address of New Registered Agent

81 Name: Mc DONOUGH Michael R
82 Street Address (P.O. Box Number is Not Acceptable): 1253 University DR #339
83: C/O
84 City: CORAL SPRINGS **FL** 85 Zip Code: 33071

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: Michael R McDonough — Michael R McDonough — 5-19-95
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) (DATE)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE		☒ Change ☐ Addition
NAME	MCDONOUGH, BETH L.	12 NAME		
STREET ADDRESS	63 ANN LEE LANE	13 STREET ADDRESS	1253 UNIVERSITY DR #339	
CITY-ST-ZIP	TAMARAC FL	14 CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE	DV	21 TITLE		☒ Change ☐ Addition
NAME	MCDONOUGH, MICHAEL R.	22 NAME		
STREET ADDRESS	63 ANN LEE LANE	23 STREET ADDRESS	1253 UNIVERSITY DR. #339	
CITY-ST-ZIP	TAMARAC FL	24 CITY-ST-ZIP	Coral Springs, FL. 33071	
TITLE	DS	31 TITLE		☐ Change ☐ Addition
NAME	TERRY, KEITH R.	32 NAME		
STREET ADDRESS	1157 SUSSEX DR.	33 STREET ADDRESS		
CITY-ST-ZIP	N. LAUDERDALE FL	34 CITY-ST-ZIP		
TITLE		41 TITLE		☐ Change ☐ Addition
NAME		42 NAME		
STREET ADDRESS		43 STREET ADDRESS		
CITY-ST-ZIP		44 CITY-ST-ZIP		
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Michael R McDonough — Michael R McDonough — 5-19-95 — 305 739 9939
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0114078 CP