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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # V24442

1. Corporation Name

(8)

NATION WATCH SECURITY & INVESTIGATIONS INC.

## FILED Apr 28 1997 8:00am Secretary of State



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Principal Place of		Mailing Address			
12307 S.W. 133 C MIAMI FL 33186	<b>.</b>	12307 S.W. 133 CT. Miami Fl 331 <del>88-6434</del>			
				3. Date Incorporated or Qualifie 03/25/1992	d 3a. Date of Last Report 07/24/1996
2. Principal Place	e of Business	2a. Mailing Address	200 -	4. FEI Number	Applied For
7 13500	SW 88 STREET	26 13500 2	W 88 St.	65-0348858	Not Applica
Suite Apt #. (	etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State	T=1	6. Election Campaign Financing	<del></del>
3 NIPM		28 M 1 PM) 1	FL	Trust Fund Contribution	Added to Fees
3318	RO 25 DANE	321860	30 DADE	This corporation has liability f     Florida Statutes	for intangible tax under s. 199.032.
1	9. Name and Address of Curren		30 3 17 136	10. Name and Address of New	
PALM/	A. ANTERO		81 Name O	and Antoro	
11854	S.W. 99TH STREET		82 Street Add	dress (P.D. Box Number in Not Accen	vable) .
MIAMI	FL 33186		14	423 SW 107 1	<i>fenn</i>
			83		
			84 City	1:0:05	85 Z <sub>I</sub> p Code
				410mg	FL 3386
1. Pursuant to I	the provisions of Sections 607.0502	2 and 607.1508, Florida Statut of Florida, Such change was a	es, the above-named co	rporation submits this statement for the	ne purpose of changing its register
agent Lamif	familiar with, and accept the obliga	ations of, Section 607.0505, Flo	orida Statutes.	ation's board of directors. I hereby ac	oopt the appointment as regions.
GNATURE					······································
5(g) <b>2,</b>	youture: Typed or printed name of registered ager OFFICERS AND		E: Flegistered Agent signature req		DATE FICERS AND DIRECTORS IN 12
2,	OFFICE AS AND	DINECTORS	19,	ADDITIONS/CHANGES TO OF	I IOLIIO MID DINEOTORO III 12
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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 recoiver 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 AND TYPED OR PRINTED NAME OF BIGNING OFFICER

4/21/97

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