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

**PROFIT** CORPORATION **ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	MENT # V2 r security, inc.	6544 (	9)			
Principal Plac	e of Business	Mailing Addre	ss			. DI DIDII BIBII DIDII DIDII DIDII DIDII DIDII DIDII I
11891 157 PL JUPITER FL 3 US			11891 157 PL. N. JUPITER FL 33478		DO NOT WRITE IN THIS SPACE  3. Date Incorporated or Qualified	
					04/03/1992	
2. Principal Place of Business 2a. Mailing			dress		4. FEI Number	Applied For
21		26	26		65-0324328	Not Applicable
Suite, Apt. #, etc.		<del> </del>	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27				Fee Required
City & State		<b>⊢</b> '	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28 Zip		ountry	Trust Fund Contribution  8. This corporation owes or has p	Added to Fees
24	25	29	30	,	Personal Property Tax due Jun	
	9. Name and Address	of Current Registered Agen			10. Name and Address of New R	
KN	IGHT, GEORGE P III			81 Name	night, George P.	<del>11  </del>
AAAA BU PRAIDE DR				82 Street Add	rest (P.O. Box Number is No Accepta	able)
APT. 4					157 PI N	
CORAL SPRINGS FL 33071				83		
				84 City	1.0	85 Zip Code
44 Purguant	to the provisions of Coglier	on CO7 0602 and CO7 1609 Fig	rida Clatutas, tha		tcr	FL 33478
office or re	egi <b>ste</b> red agent, or both, in	n the State of Florida. Such chi	ange was authoriz	ed by the corporal	poration submits this statement for the tion's board of directors. I hereby acce	purpose of changing its registered appointment as registered
agent. I a	m familiar with, and accep	t the obligations of, Section 60	7.0505, Florida Si	atutes.		
SIGNATURE	Signature, typed or printed name of	registered agent and the if applicable	{NOTE_Registe	red Agont signature requi	red when reinstating)	DATE
12.		ICERS AND DIRECTORS	13		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	P	<del>-</del>	DELETE 1.1	TITLE		Change Addition
NAME	KNIGHT, GEORGE P III		1.2	NAME		
STREET ADDRESS	11891 157 PL. N		1.3	STREET ADDRESS		
CITY-ST-ZIP	JUPITER FL			CITY-ST-ZIP		
TITLE		L		TITLE		Change Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP TITLE				CITY-ST-ZIP TITLE		Change Addition
NAME				NAME		
STREET ADDRESS				STREET ADDRESS		
CITY-ST-ZIP				CITY-ST-ZIP		
TITLE				TITLE		Change Addition
NAME			4. 2	NAME		
STREET ADDRESS			4.3	STREET ADDRESS		
CITY-ST-ZIP			4.4	CITY-ST-ZIP		
TITLE			DELETE 51	TITLE		Change Addition
NAME			52	NAME		
STREET ADDRESS			53	STREET ADDRESS		
CITY-ST-ZIP	<u>.</u>			CITY-SI-ZIP		
TITLE				TITLF		☐ Change ☐ Addition
NAME				NAME		
STREET ADDRESS			6.3	STREET ADDRESS		

CITY-ST-ZIP

14. I heroby 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 path; 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.

1-30-98

**FILED** 

Feb 03 1998 8:00am

Secretary of State