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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

FILED
Mar 24 1997 8:00am
Secretary of State

Principal Place of Bosness SECUR-ENTRY INDUSTRIES INC. Principal Place of Bosness Marling Address Fig. Box 2777 PALM BEACH FL 33480-2777 US							
US				 Date Incorporated or Qualified 05/27/1992 	3a. Date of Last R 05/01/1996	leport	
Pancipal P	lace of Business	2a. Mailing Address		4. FEI Number		oplied For	
Suite, Apt. #, etc. P. City & State		Suite, Apt #, etc.		NOT APPLICABLE	60 7F	Not Applicable \$8.75 Additional	
		27 City & State		Certificate of Status Desired Rection Campaign Financing Trust Fund Contribution	Fee Required		
						\$5.00 May Be Added to Fees	
Д	Country	Z _(p)	Country	8. This corporation has liability for i	intangible tax under s		
]	[25]	29	30	Florida Statutes 10. Name and Address of New Re	Yes No		
CAP	 Name and Address of Cur PUTO, GINO 	rent Registered Agent	81 Name	IU. Name and Address of New Re	gistered Agent		
	O N OCEAN DR		82 Street Ad	dress (P.O. Box Number is Not Acceptab	nle)		
805				torous (1.10. box riamos) is riot rivotpical			
SIN	GER ISLAND FL 33404		83				
			84 City		FL 85 Zip	Code	
	milifaer en with and accept the ot	oligations of Section 607.0505, I	s authorized by the corpor Florida Statutes.	orporation submits this statement for the pration's board of directors. I hereby accept	ot the appointment as	registered	
IGNATURE	Signature by a discipanted harmonthingure con-		s authorized by the corpol Florida Statutes. DIE Registered Agent signature res 13. 1.1 Title		DATE		
GNATURE L	Signative ty of the product instructor's greatest OFFICERS. PTD CAPUTO, GINO	tagent and the inapplicability (NI AND DIRECTORS	DTE: Registered Agent signature red	quired when feinstating)	DATE CERS AND DIRECTOR	RS IN 12	
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To remark the lay that the mornison supprison was this ping does not quality for the exemptor stated in section 119.07(3)(), Florida Statutes. Tribine 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 eath; that it am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 m Block 31 that graphs or or an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED WANTE OF BIONING OFFICER OR DIRECTOR

0335495