Feb 25, 1999 8:00 am Secretary of State

02-25-1999 90018 047 ***163.75

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V38968

1. Corporation Name

SECUR -	Entry industries inc.				
Principal Place	e of Business	Mailing Address			i usuki ulali usuki uluk biali labi
5420 N OCEAN DR P.O. BOX 2777 805 PALM BEACH FL 33480			DO NOT WRITE IN TH	IS SPACE	
SINGER ISLAND FL 33404 US				3. Date Incorporated or Qualifed	
				05/27/1992	
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		NOT APPLICABLE	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	· · ·	5. Certificate of Status Desired	\$8.75 Additional
22	* - 4	27		5. Certificate of Status Desired	Fee Required
City & State	е .	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
,	Country	Zip	Country	8. This corporation owes the current year t	ntangible
24	25		30	Personal Property Tax. 10. Name and Address of New Registere	<u></u>
	9. Name and Address of Current	Registered Agent	81 Name		
CAPI	UTO, GINO			G.NO CAPUTO	
	N QEEAN DR		82 Street A	Address (P.O. Box Number is Not Acceptable)	
805	X		83	75 THINGK DE	
SINGER ISLAND FL 33404					
			84 City 5	NGER ISLAND F	L 85 Zip Code 33 404
office or re	to the provisions of Sections 607.0502 egistered agent, or both, in the State on familiar with, and accept the obligati	if Florida. Such change was au	s, the above-named of	corporation submits this statement for the purpose ration's board of directors. I hereby accept the app	of changing its registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: I	Registered Agent signature re	guired when reinstating) DATE	<u></u>
	digitature, types to printed in the contested agont				
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS	
12. TITLE	OFFICERS AND			ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
	PTD	D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE		D DIRECTORS	13. 1.1 TITLE	ADDITIONS/CHANGES TO OFFICERS	Change Addition
NAME	PTD CAPUTO, GINO	D DIRECTORS	13. 1.1 TITLE 1.2 NAME	ADDITIONS/CHANGES TO OFFICERS	Change Addition
TITLE NAME STREET ADDRESS	PTD CAPUTO, GINO 5420 N-OCEAN DR	D DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS	Change Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PTD CAPUTO, GINO 5420 N-OCEAN DR SINGER ISLAND FL VSD CAPUTO, ROSALBA 5420 N-OCEAN-DR SINGER ISLAND FL D	D DIRECTORS	13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ADDITIONS/CHANGES TO OFFICERS/ PTD CAPUTO CINO CAPUTO 1190 MANDE OR 31NGER 13LANI), VSD DOS 1161	FC · 33434 Change Addition
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TITLE NAME STREET ADDRESS CJTY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PTD CAPUTO, GINO 5420 N-OCEAN DR SINGER ISLAND FL VSD CAPUTO, ROSALBA 5420 N-OCEAN-DR SINGER ISLAND FL D CAPUTO, MICHAEL 5420 NORTH-OCEN-DR #808	D DIRECTORS DELETE DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS/ PTD CAPUTO CINO CAPUTO 1190 MANDE OR 31NGER 13LANI), VSD DOS 1161	FC · 33434 Change Addition
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CITY-ST-ZIP 14. I 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, with all other like empowered.

6.4 CITY-ST-ZIP

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFE