

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F95000002109

FILED  
Jan 26, 2010  
Secretary of State

**Entity Name:** SECURITY INFORMATION SYSTEMS, INC.

**Current Principal Place of Business:**

6314 KINGSPONTE PARKWAY  
SUITE 3  
ORLANDO, FL 32819 US

**New Principal Place of Business:**

**Current Mailing Address:**

6314 KINGSPONTE PARKWAY  
SUITE 3  
ORLANDO, FL 32819 US

**New Mailing Address:**

**FEI Number:** 38-2858470

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

DEAN, GREENBLATT  
6314 KINGSPONTE PARKWAY  
SUITE 3  
ORLANDO, FL 32819 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: C  
Name: MEGLER, MICHAEL  
Address: 6314 KINGSPONTE PARKWAY, SUITE 3  
City-St-Zip: ORLANDO, FL 32819

Title: P  
Name: \*\*REMOVED PURSUANT TO 119.07, F.S.  
Address: \*  
City-St-Zip: \*, \*

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: MEGLER MICHAEL

C

01/26/2010

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date