

2005 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Mar 29, 2005
Secretary of State

DOCUMENT# L03000002629

Entity Name: DADE VIDEO SYSTEMS, LLC

Current Principal Place of Business:

3211 PONCE DE LEON BLVD.
SUITE 301
CORAL GABLES, FL 33134

New Principal Place of Business:

3211 PONCE DE LEON BLVD. 301
SUITE 301
CORAL GABLES, FL 33134

Current Mailing Address:

3211 PONCE DE LEON BLVD.
SUITE 301
CORAL GABLES, FL 33134

New Mailing Address:

3211 PONCE DE LEON BLVD. 301
SUITE 301
CORAL GABLES, FL 33134

FEI Number: 30-0187288

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REX, BARKER M
3211 PONCE DE LEON 301
CORAL GABLES, FL 33134 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

MANAGING MEMBERS/MEMBERS:

Title: MGR () Delete
Name: JOSE, MILTON
Address: 3211 PONCE DE LEON 301
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Delete
Name: CECIL, MILTON
Address: 3211 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Delete
Name: JOSEPH, MILTON
Address: 3211 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134 US

Title: MGRM () Delete
Name: FRANK, MILTON
Address: 3211 PONCE DE LEON
City-St-Zip: CORAL GABLES, FL 33134 US

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

SIGNATURE: JOSEPH MILTON

MGRM

03/29/2005

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date