## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P06000052777

Address:

City-St-Zip:

705 SW 12TH ST

FLORIDA CITY, FL 33034

Entity Name: SECURITY SYSTEMS SOLUTIONS, CORP

FILED Jan 04, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
10040 NW 9TH ST CIR 202			8211 NW 64 ST		
MIAMI, FL	331725132		#8 MIAMI, FL 33166 U	JS	
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
10040 NW 9TH ST CIR 202 MIAMI, FL 331725132			8211 NW 64 ST		
			#8	JS	
EEI Number	: 20-4711285	FEI Number Applied For ( )	MIAMI, FL 33166 U		
FEI NUITIDEI	: 20-4711265	rei Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
10040 NW MIAMI, FL	EDUARDO / 9TH ST CIR 20 331725132 US	}	purpose of changing its registers	ed office or registered agent, or both,	
	e of Florida.	domino uno otatement for the	purpose or changing its registere	a office of registered agent, or both,	
SIGNATU	RE:				
	Electroni	Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	DP () I MARTIN, EDUAR 10040 NW 9TH S MIAMI, FL 3317	ST CIR 202	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	DV () RODRIGUEZ, RO 11109 SW 154 F MIAMI, FL 3319	PL	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name:	DC ()  RODRIGUEZ, JO	Delete DRGE R	Title: Name:	( ) Change ( ) Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

Address:

City-St-Zip:

SIGNATURE: EDUARDO MARTIN DP 01/04/2007