

# 2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000048875

FILED  
Apr 29, 2002 8:00 AM  
Secretary of State

Entity Name: FORCE SECURITY SYSTEMS, INC.

**Current Principal Place of Business:**

220 E. MADISON STREET., #1000  
TAMPA, FL 33602 US

**New Principal Place of Business:**

**Current Mailing Address:**

220 E. MADISON STREET., #1000  
TAMPA, FL 33602 US

**New Mailing Address:**

FEI Number: 59-3336813

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

VELASCO, MONTY  
8802 BAY POINTE DR B-201  
TAMPA, FL 33615 US

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

VELASCO, MONTY  
220 E. MADISON, #1000  
TAMPA, FL 33602 US

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: MONTY VELASCO

04/29/2002

Electronic Signature of Registered Agent

Date

This corporation is eligible to satisfy its Intangible Tax filing requirement and elects to do so (X).

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: VELASCO, MONTY  
Address: 220 E. MADISON STREET., #1000  
City-St-Zip: TAMPA, FL 33602 US

Title: P ( ) Delete  
Name: VELASCO, ROBERT  
Address: 220 E. MADISON STREET., #1000  
City-St-Zip: TAMPA, FL 33602 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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 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.

SIGNATURE: ROBERT VELASCO

P

04/29/2002

Electronic Signature of Signing Officer or Director

Date