

**2004 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P99000047773

**FILED**  
**Aug 18, 2004**  
**Secretary of State**

**Entity Name:** CONTROL AND COMMUNICATION SYSTEMS INTEGRATORS-CCSI CORP.

**Current Principal Place of Business:**

10925 NW 27 STREET  
SUITE 201  
MIAMI, FL 33172

**New Principal Place of Business:**

**Current Mailing Address:**

C/O ANCLA INTL  
10925 NW 27 STREET STE 201  
MIAMI, FL 33172

**New Mailing Address:**

**FEI Number:** 65-0922748      **FEI Number Applied For ( )**      **FEI Number Not Applicable ( )**      **Certificate of Status Desired ( )**

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

REVNA, PATRICIA  
10925 NW 27 STREET  
SUITE 201  
MIAMI, FL 33172

**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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.  
Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: MARTINEZ, CARLOS E  
Address: 10925 NW 27 STREET STE 201  
City-St-Zip: MIAMI, FL 33172

Title: VD ( ) Delete  
Name: SANCHEZ, MARIA A  
Address: 10925 NW 27 STREET STE 201  
City-St-Zip: MIAMI, FL 33172

Title: TD ( ) Delete  
Name: SANCHEZ, CECILIA  
Address: 1400 NW 96TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: SD ( ) Delete  
Name: BRADLEY, CARL V  
Address: 1400 NW 96TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: MARTINEZ, JORGE G  
Address: 1400 NW 96TH AVE  
City-St-Zip: MIAMI, FL 33172

Title: D ( ) Delete  
Name: CARDENAS, ROBERTO  
Address: 1400 NW 96TH AVE  
City-St-Zip: MIAMI, FL 33172

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

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:

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: MARTINEZ, CARLOS E

P

08/18/2004

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date