

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F88064

FILED
Feb 04, 2004
Secretary of State

Entity Name: NATIONAL SECURITY CONSULTANTS, INC.

Current Principal Place of Business:

928 SW 82 AVENUE
MIAMI, FL 33144 US

New Principal Place of Business:

8700 WEST FLAGLER STREET
SUITE 305
MIAMI, FL 33174 US

Current Mailing Address:

928 SW 82 AVENUE
MIAMI, FL 33144 US

New Mailing Address:

8700 WEST FLAGLER STREET
SUITE 305
MIAMI, FL 33174 US

FEI Number: 59-2211952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FERNANDEZ, LEIF G
928 SW 82 AVENUE
MIAMI, FL 33144 US

Name and Address of New Registered Agent:

FERNANDEZ, LEIF G
8700 WEST FLAGLER STREET
SUITE 305
MIAMI, FL 33174 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:

02/04/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FERNANDEZ, LEIF G
Address: 928 SW 82 AVENUE
City-St-Zip: MIAMI, FL 33144 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: FERNANDEZ, LEIF G
Address: 8700 WEST FLAGLER STREET, SUITE 305
City-St-Zip: MIAMI, FL 33174 US

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: LEIF G. FERNANDEZ

P

02/04/2004

Electronic Signature of Signing Officer or Director

Date