

# 2005 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

**DOCUMENT # P02000075974**

1. Entity Name  
**SEGURIDAD ELECTRONICA TRADING CORPORATION**



**FILED**  
05 SEP 27 AM 11:09  
TALLAHASSEE, FLORIDA

Principal Place of Business  
**2950 WEST 84TH ST.  
HIALEAH, FL 33018**

Mailing Address  
**2950 WEST 84TH ST.  
HIALEAH, FL 33018**



2. Principal Place of Business

3. Mailing Address

09082005 Chg-P CR2E034 (10/03) *JK Yep*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number  
**52-2367063**

Applied For  
 Not Applicable

City & State

City & State

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

Zip Country

Zip Country

**6. Name and Address of Current Registered Agent**

**7. Name and Address of New Registered Agent**

**BANDA, DANIEL G  
4370 FOXTAIL LANE  
WESTON, FL 33331**

Name  
**BANDA, DANIEL G**

Street Address (P.O. Box Number is Not Acceptable)  
**2950 W 84th ST #4**

City  
**HIALEAH**

FL Zip Code  
**33018**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: *[Signature]* (NOTE: Registered Agent signature required when reinstating) DATE

**Amended AR is \$61.25**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

**10. OFFICERS AND DIRECTORS**

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11**

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>BANDA, DANIEL G 4370 FOXTAIL LANE WESTON, FL 33331</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>GRACIS, ADRIANA 4370 FOXTAIL LANE WESTON, FL 33331</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>D'ERRICO, VIRGINIA 4370 FOXTAIL LANE WESTON, FL 33331</b>	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <b>BANDA, DANIEL G. 2950 W 84th ST HIALEAH, FL 33018</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <b>GRACIS, ADRIANA 2950 W 84th ST. HIALEAH, FL 33018</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <b>D'ERRICO, VIRGINIA 2950 W 84th ST HIALEAH, FL 33018</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>900060089255 09/29/05--01071--016 **61.25</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** *[Signature]* **September 16<sup>th</sup> 2005**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #