

**FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

FILED
Mar 12, 2007 8:00 am
Secretary of State

03-12-2007 90375 032 ***150.00

DOCUMENT # F03000001870

1. Entity Name

Identity Systems Inc.



DO NOT WRITE IN THIS SPACE

40034543

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
102 Corporate Park Drive

Suite, Apt. #, etc.

3. Mailing Address
c/o Nokia, 6000 Connection Dr.

Suite, Apt. #, etc.

Attn: Jill Piasecki, MC 1-9-960

City & State
White Plains, NY

City & State
Irving, TX

4. FEI Number
06-1195518

Applied For
Not Applicable

Zip
10604

Country
USA

Zip
75039

Country
USA

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

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name
NRAI Services, Inc.

Street Address (P.O. Box Number is Not Acceptable)

2731 Executive Park Drive, Suite 4

City
Weston

FL

Zip Code
33331

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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent Signature required when registering)

DATE

January 1 - May 1 Fee is \$150.00

After May 1, Fee is \$550.00

Amended UBR is \$61.25

Make Check Payable to Florida Department of State

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

see attached

TITLE
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CITY- ST- ZIP

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IN THIS SPACE**

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 on an attachment with an address, with all other, duly empowered.

SIGNATURE:

Eric Marmurek

Eric Marmurek

2/5/07

214-244-3170

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

136,200th Phone #

CR2E034B (12/02)