

2014 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000164368

Entity Name: ECLIPSE SECURITY, INC.

Current Principal Place of Business:

18560 SW 4 ST
PEMBROKE PINES, FL 33029

Current Mailing Address:

18560 SW 4 ST
PEMBROKE PINES, FL 33029

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VELLON, ARIELLE
18560 SW 4 ST
PEMBROKE PINES, FL 33029 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name VELLON, ARIELLE
Address 18560 SW 4 ST
City-State-Zip: PEMBROKE PINES FL 33029

I hereby 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 all other like empowered.

SIGNATURE: ARIELLE VELLON

PRESIDENT

03/20/2014

Electronic Signature of Signing Officer/Director Detail

Date