

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

LIMITED
PARTNERSHIP
REINSTATEMENT



DIVISION OF CORPORATIONS

FILED

03 JUN -9 AM 8 00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # B95 0000000 19

1. Name of Limited Partnership

PC AFFORDABLE SECURIM, LTD.

400020693894

06/09/03--01100--002 **2061.25

2. Principal Office Address

2930 BANYAN BLVD CIR NW

3. Mailing Office Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

BOCA RATON, FL

City & State

Zip

33431

Country

USA

Zip

Country

8. Name and Address of Current Registered Agent

Name

SAFE & SOUND SECURITY, INC.

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

2930 BANYAN BLVD CIR NW

Suite, Apt. #, Etc.

City

BOCA RATON

State

FL

Zip Code

33431

9. Pursuant to the provisions of sections 620.1051 and 620.192, Florida Statutes, the above-named limited partnership organized or registered under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by its general partner(s). I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of section 620.192, Florida Statutes.

SIGNATURE (Registered Agent Accepting Appointment)

DATE

10/24/02

A GENERAL PARTNER THAT IS A CORPORATION, LIMITED PARTNERSHIP OR OTHER BUSINESS ENTITY MUST BE REGISTERED AND ACTIVE WITH THIS OFFICE.

10.

Name(s) of General Partner(s)

Address of Each General Partner
(Do NOT Use Post Office Box Numbers)

City, State and Zip Code

10a.

Registration
Document Number

SAFE & SOUND SECURITY, INC.

2930 BANYAN BLVD CIR

BOCA RATON, FL 33431

F95000000178

REINSTATEMENT

02.03.03
ace

Note: General partners MAY NOT be changed on this form; an amendment must be filed to change a general partner.

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effects as if made under oath. I further certify that I am a General Partner of the limited partnership, receiver or trustee empowered to execute this report as required by chapter 620, Florida Statutes.

SIGNATURE

Julie Christ Gurlay, Pres.

DATE

10/24/02

Typed or Printed Name of General Partner Signing Form

JULIE CHRIST GURLAY, PRES. SAFE & SOUND

Telephone Number

561/241-3018

CR2E039 (10/02)