2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F01000002581

Address:

City-St-Zip:

305 MADISON AVE.

NEW YORK, NY

Entity Name: INTEGRATED SECURITY SERVICES, INC. OF N.Y.

FILED Jan 15, 2007 Secretary of State

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Current Principal Place of Business:				New Principal Place of Business:		
305 MADISON AVE.			305 MADISON AVE.			
1942 NEW YORK, NY 10165				1563 NEW YORK, NY 10165		
Current Mailing Address:				New Mailing Address:		
305 MADIS 1942 NEW YOR	SON AVE. RK, NY 10165			305 MADISON AVE. 1563 NEW YORK, NY 10165		
FEI Number:	: 13-4029788	FEI Number Applied For ()	FEI Nun	nber Not Applicable ()	Certificate of Status Desired (X)	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
HERSH, MERYL 62-63 NW 170TH TERRACE MIAMI, FL 33015 US				AYVERDI, HAKKI 1441 BRICKELL AVENUE, 3RD FLOOR-SKY LOBBY DESK MIAMI, FL 33131 US		
	named entity s e of Florida.	submits this statement for the	purpose o	f changing its registered of	office or registered agent, or both,	
SIGNATURE: HAKKI				01/15/2007		
	Electror	ic Signature of Registered Ag	gent		Date	
Election Car	mpaign Financin	g Trust Fund Contribution ().				
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PCD () SCHISSEL, GA 305 MADISON NEW YORK, N	AVE.		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name: Address: City-St-Zip:	VS () SCHISSEL, ALA 305 MADISON NEW YORK, N	AVE.		Title: (Name: Address: City-St-Zip:) Change ()Addition	
Title: Name:	T (X INGRAM, DOU	Delete GLAS J		Title: () Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: ALAN SCHISSEL VS 01/15/2007