

# 2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # F04000000008

1. Entity Name  
NCA SYSTEMS, INC. OF ILLINOIS



Principal Place of Business

11836 N.W. 9TH ST  
CORAL SPRINGS, FL 33071

Mailing Address

11836 N.W. 9TH ST  
CORAL SPRINGS, FL 33071

**FILED**  
**Apr 06, 2005 08:00 AM**  
**Secretary of State**



01062005 No Chg-P CR2E034 (10/03)

4. FEI Number  
36-3551318

Applied For  
Not Applicable

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

**DO NOT WRITE IN THIS SPACE**

6. Name and Address of Current Registered Agent

ROSEN, GEORGE J  
11836 N.W. 9TH ST  
CORAL SPRINGS, FL 33071

**DO NOT WRITE  
IN THIS SPACE**

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 reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2005 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE PD  
NAME ROSEN, GEORGE J  
STREET ADDRESS 11836 N.W. 9TH ST  
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE VSTD  
NAME ROSEN, VERA  
STREET ADDRESS 11836 N.W. 9TH ST  
CITY-ST-ZIP CORAL SPRINGS, FL 33071

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

U000000289306  
04/06/05-80021-010 150.00

**DO NOT WRITE  
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)(f), 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:

*George J. Rosen* (GEORGE J. ROSEN) President

4/10/05

Date

Daytime Phone #

954 -  
755-0748