2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F04000002004

Entity Name: GLOBAL SECURE SYSTEMS CORP.

FILED Aug 11, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
5112 ARNOLD AVENUE MCCLELLAN, CA 95652							
Current Mailing Address:				New Mailing Address:			
5112 ARNOLD AVENUE MCCLELLAN, CA 95652				8601 RANCH ROAD 2222 BLDG 1 STE 290 AUSTIN, TX 78730			
FEI Number: 75-2992094 FEI Number Applied For () FEI Num			nber Not Applicable () Certificate of Status Desired (X)				
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:			
CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE, FL 323012525 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							
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:							
Title:	. ,	Delete		Title:		ange () Addition	
Name: Address: City-St-Zip:	BARDES, CRAIG 2600 VIRGINIA AVE. NW # 600 WASHINGTON, DC 20037			Name: Address: City-St-Zip:			
Title:		Delete		Title: Name:		ange () Addition	
Name: Address:	GALLER, ERIC S 2600 VIRGINIA A	GALLER, ERIC S. 2600 VIRGINIA AVE. NW # 600			GALLER, ERIC S. s: 2600 VIRGINIA AVE. NW # 600		
City-St-Zip:	WASHINGTON, DC 20037			City-St-Zip: WASHINGTON, DC 20037			
Title: Name:	CFOT () I	Delete ELR		Title: Name:	PRES (X) Cha	ange () Addition	
Address: City-St-Zip:	2600 VIRGINIA A	VE. NW # 600		Address: City-St-Zip:	,	D 2222 BLDG 1 STE 290	
Title:		Delete		Title:			
Name:	BONDES, CRAIG	6		Name:	() Chi	ange()Addition	
Address: City-St-Zip:	2600 VIRGINIA AVE. NW # 600 WASHINGTON, DC 20037		Address: City-St-Zip:				
Title:	,			Title:	() Change () Addition		
Name: Address:				Name: Address:			
City-St-Zip:				City-St-Zip:			
Title:	` '	Delete		Title: Name:	() Cha	ange()Addition	
Name: Address:	SHAFFER, ERIC 5112 ARNOLD A	12 ARNOLD AVE					
City-St-Zip:	MCCLELLAN, CA	A 95652		City-St-Zip:			

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.

SIGNATURE: ERIC SHAFFER PRES 08/11/2006