2008 FOR PROFIT CORPORATION

Feb 15, 2008 8:00 am ANNUAL REPORT **Secretary of State** DOCUMENT # F05000005128 02-15-2008 90006 037 ***150.00 1. Entity Name G4S JUSTICE SERVICES, INC. Principal Place of Business Mailing Address 30201 AVENTURA 30201 AVENTURA RANCHO SANTA MARGARITA, CA 92688 RANCHO SANTA MARGARITA, CA 92688 2. Principal Place of Business - No P.O. Box # 3. Mailing Address 2000 Kiver Edge PKWY 2000 Riverta Suite, Apt. #, etc. 02122008 CR2E034 (12/06) Chg-P Suite GL 100. Suite GL 100 City & State AHanta 4. FEI Number Applied For 33-0983972 Not Applicable Country Country \$8.75 Additional 5. Certificate of Status Desired \Box 30328 USA Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent C T CORPORATION SYSTEM Street Address (P.O. Box Number is Not Acceptable) 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 City Zip Code 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) 9."Election Campaign Financing \$5:00 May Be FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. After May 1, 2008 Fee will be \$550.00 Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 11. TITLE Delete TITLE CP Keith Badham WALTERS, FIONA NAME NAME 2000 RiverEdge PKWY # 6L100 STREET ADDRESS 30201 AVENTURA STREET ADDRESS CITY-ST-ZIP RANCHO SANTA MARGARITA, CA 92688 CITY-ST-ZIP 9 Hanta TITLE ☐ Delete TITLE Change . Addition PRINZIVALLI, DOMENIC NAME NAME Walters STREET ADDRESS 30201 AVENTURA 2000 RiverEdge PKwy # 66100 STREET ADDRESS CITY+ST-ZIP RANCHO SANTA MARGARITA, CA 92688 CITY-ST-ZIP AHanta 61 30328 TITLE Delete Treasurer ☐ Addition LOUGHLIN, PETER Ted o' Donnell NAME NAME 2000 RiverEdge PKWY STREET ADDRESS 30201 AVENTURA STREET ADDRESS CITY-ST-ZIP RANCHO SANTA MARGARITA, CA 92688 CITY-ST-ZIP AHanta ☐ Delete TITLE TITLE ☐ Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-\$T-ZIP CITY-ST-ZIP TITLE ☐ Delete TIT1 F Change Change ■ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ...

SIGNATURE:

FILED