2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F06000004310

Entity Name: IDENTICARD SYSTEMS WORLDWIDE, INC.

FILED Jan 18, 2007 Secretary of State

Current Principal Place of Business: 40 CITATION LANE				New Principal Place of Business:		
LITITZ, PA 175437604						
Current Mailing Address:			New Ma	New Mailing Address:		
6555 W GOOD HOPE RD PO BOX 571 MILWAUKEE, WI 53223						
FEI Number: 20-4090527 FEI Number Applied For () FEI Number		FEI Number Not A	mber Not Applicable () Certificate of Status Desired ()			
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:						
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324 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		
Election Campaign Financing Trust Fund Contribution ().						
OFFICERS AND DIRECTORS:			ADDITIO	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	JAEHNERT, FRA	IOPE RD PO BOX 571	Title: Name: Address: City-St-Zip	PD (X) Change () Addition JAEHNERT, FRANK M 6555 W GOOD HOPE RD p: MILWAUKEE, WI 532010571		
Title: Name: Address: City-St-Zip:	MATHIESON, DA	IOPE RD PO BOX 571	Title: Name: Address: City-St-Zip			
Title: Name: Address: City-St-Zip:	HAWKE, DAVIÓ F	IOPE RD PO BOX 571	Title: Name: Address: City-St-Zip	VPD (X) Change () Addition HAWKE, DAVID R 6555 W GOOD HOPE RD p: MILWAUKEE, WI 532010571		
Title: Name: Address: City-St-Zip:	FELMER, THOMA	IOPE RD PO BOX 571	Title: Name: Address: City-St-Zip	VP (X) Change () Addition FELMER, THOMAS R 6555 W GOOD HOPE RD p: MILWAUKEE, WI 532010571		
Title: Name: Address: City-St-Zip:	JOHNSON, KATH	IOPE RD PO BOX 571	Title: Name: Address: City-St-Zip	() Change () Addition p:		
Title: Name: Address: City-St-Zip:	BOLENS, BARBA	IOPE RD PO BOX 571	Title: Name: Address: City-St-Zip	VPT (X) Change () Addition BOLENS, BARBARA G 6555 W GOOD HOPE RD p: MILWAUKEE, WI 532010571		

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: FRANK M JAEHNERT CEO 01/18/2007