

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# F08000002952

**FILED**  
**Feb 08, 2012**  
**Secretary of State**

**Entity Name:** GSS SECURITY SERVICES, INC

**Current Principal Place of Business:**

250 W 49TH ST  
705  
NEW YORK, NY 10019

**New Principal Place of Business:**

**Current Mailing Address:**

250 W 49TH ST  
NEW YORK, NY 10019

**New Mailing Address:**

250 W 49TH ST  
705  
NEW YORK, NY 10019

**FEI Number:** 13-3756890

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

INCorp SERVICES, INC  
17888 67TH COURT NORTH  
LOXAHATCHEE, FL 33470 US

**Name and Address of New Registered Agent:**

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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: SMARAGDAKIS, JOHN  
Address: 281 SCOTCHTOWN RD  
City-St-Zip: GOSHEN, NY 10924

Title: VP  
Name: SMARAGDAKIS, LAURA  
Address: 281 SCOTCHTOWN ROAD  
City-St-Zip: GOSHEN, NY 10924

I hereby 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 all other like empowered.

SIGNATURE: LAURA SMARAGDAKIS

VP

02/08/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date