

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F08000004517

FILED  
Apr 12, 2012  
Secretary of State

**Entity Name:** OPTICAL CRIME PREVENTION, INC.

**Current Principal Place of Business:**

14051 NW 14TH STREET  
SUNRISE, FL 33323

**New Principal Place of Business:**

8360 W OAKLAND PARK BLVD  
SUITE 201  
SUNRISE, FL 33351

**Current Mailing Address:**

14051 NW 14TH STREET  
SUNRISE, FL 33323

**New Mailing Address:**

8360 W OAKLAND PARK BLVD  
SUITE 201  
SUNRISE, FL 33351

**FEI Number:** 90-0413804

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DUBOIS, JOHN E  
18495 S. DIXIE HWY  
107  
CUTLER BAY, FL 33157 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:** C  
**Name:** LUCATORTO, JOSEPH  
**Address:** 20 ORCHID STREET  
**City-St-Zip:** FLORAL PARK, NY 11001

**Title:** VCP  
**Name:** DUBOIS, JOHN  
**Address:** 18495 S DIXIE HWY  
**City-St-Zip:** PALMETTO BAY, FL 33157

**Title:** DS  
**Name:** NANJI, SUHAIL  
**Address:** 6811 NW 117TH AVE  
**City-St-Zip:** PARKLAND, FL 33076

**Title:** D  
**Name:** DICKINSON, ROBERT  
**Address:** 29 TAHITI BEACH ISLAND ROAD  
**City-St-Zip:** CORAL GABLES, FL 33143

**Title:** D  
**Name:** CHIDSEY, JOHN W  
**Address:** 18495 S. DIXIE HWY, PMB 107  
**City-St-Zip:** CUTLER BAY, FL 33157

**Title:** D  
**Name:** FRANK, KENNETH  
**Address:** 3 AV OCTAVE  
**City-St-Zip:** GREARD, PARIS, FR 75007 FR

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:** JOHN DUBOIS

VCP

04/12/2012

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

\_\_\_\_\_  
Date