

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F96000005037

FILED  
Jan 06, 2004  
Secretary of State

Entity Name: SAFEGATE AIRPORT SYSTEMS, INC.

## Current Principal Place of Business:

7101 NORTHLAND CIRCLE  
SUITE 203  
BROOKLYN PARK, MN 55428

## New Principal Place of Business:

## Current Mailing Address:

7101 NORTHLAND CIRCLE  
SUITE 203  
BROOKLYN PARK, MN 55428

## New Mailing Address:

FEI Number: 65-0303945

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

LEEDS, MICHAEL H  
BLANK ROME LLP  
1200 N FEDERAL HWY, SUITE 417  
BOCA RATON, FL 33432 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: C ( ) Delete  
Name: DAHL, BENGT  
Address: JARNYXEGATAN 13  
City-St-Zip: MALMO, SWEDEN,

Title: D ( ) Delete  
Name: HAMMARLUND, PER-OLOF  
Address: JARNYXEGATAN 13  
City-St-Zip: MALMO, SWEDEN,

Title: P ( ) Delete  
Name: DUFFY, THOMAS  
Address: 7101 NORTHLAND CIRCLE  
City-St-Zip: BROOKLYN PARK, MN 55428

Title: DVPS ( ) Delete  
Name: LEEDS, MICHAEL  
Address: 1200 N FEDERAL HWY, SUITE 417  
City-St-Zip: BOCA RATON, FL 33432

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: THOMAS DUFFY

P

01/06/2004

Electronic Signature of Signing Officer or Director

Date