

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2005 8:00 am
Secretary of State

01-25-2005 90031 030 ***150.00

DOCUMENT # F96000005957	
1. Entity Name WESTEC INTERACTIVE SECURITY, INC.	

Principal Place of Business 16842 VON KARMAN AVE SUITE 150 IRVINE, CA 92606	Mailing Address 16842 VON KARMAN AVE SUITE 150 IRVINE, CA 92606
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40005539



2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

01042005 Chg-P CR2E034 (10/03)

4. FEI Number 33-0717396	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
C T CORPORATION SYSTEM 1200 SOUTH PINE ISLAND ROAD PLANTATION, FL 33324	Name
	Street Address (P.O. Box Number is Not Acceptable)
	City
	FL 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 the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KAYE, MICHAEL S 100 BAYVIEW CIR., SUITE 5000 NEWPORT BEACH, CA 92660 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEO Gerald Vento 195 Via Del Mar, Palm Beach 33480 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SHEPHERD, JAY F 100 BAYVIEW CIR., SUITE 5000 NEWPORT BEACH, CA 92660 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Mitchell Johnson 5567 Beechwood Terrace West Des Moines, IA 50266 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	GM UPP, MICHAEL J 16842 VON KARMAN AVE STE 150 IRVINE, CA 92606 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	General Council Michael Kardash 8090 Amsterdam Ct., Hainesville, 20165 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST MARSH, JEAN M 100 BAYVIEW CIR #5000 NEWPORT BEACH, CA 92660 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCEO COOK, ROBERT A 16842 VON KARMAN AVE, SUITE 150 IRVINE, CA 92606 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: *Michael Kardash* 4/6/05 (949) 797-4700
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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ATTACHMENT

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Suite, Apt. #, etc.	Suite, Apt. #, etc.
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City & State	City & State
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Zip	Country	Zip	Country
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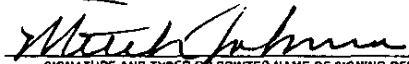
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SIGNATURE Signature, typed or printed name of registered agent and the corporation. (NOTE: Registered Agent's signature required when relocating)	DATE
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	DATE