2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# F97000003547

Entity Name: SECURITAS SECURITY SYSTEMS USA, INC.

FILED Feb 21, 2007 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
SUITE 150	ON RIDGE PK\ S, GA 30071	VY.					
Current Mailing Address:				New Mailing Address:			
4330 PARK TERRACE DRIVE WESTLAKE VILLAGE, CA 91361				4995 AVALON RIDGE PKWY SUITE 150 NORCROSS, GA 30071			
FEI Number: 9	95-4638962	FEI Number Applied For ()	El Num	ber Not Appli	cable ()	Certificate of Status Desired	()
Name and	Address of Cu	rrent Registered Agent:		Name and	Address of N	lew Registered Agent:	
NRAI SERV 2731 EXEC WESTON, I	UTIVE PARK D						
The above r		bmits this statement for the purp	ose of	changing its	s registered o	ffice or registered agent, o	r both,
SIGNATUR	E:						
	Electronic	Signature of Registered Agent				Date	
Election Cam	paign Financing	Trust Fund Contribution ().					
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	LOHNE, BJORN	Delete DGE PKWY.,#150 30071		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	VPT () E FERENS, RICHAI 4330 PARK TERI WESTLAKE VILL	RACE DRIVE		Title: Name: Address: City-St-Zip:	LOBDELL, KEV	RIDGE PKWY, ST 150	
Title: Name: Address: City-St-Zip:	LOBDELL, KEVIN	DGE PKWY.#150		Title: Name: Address: City-St-Zip:	WEAVER, MAR	RIDGE PKWY.#150	
Title: Name: Address: City-St-Zip:	S () E FOX, JAMES H 4330 PARK TERI WESTLAKE VILL			Title: Name: Address: City-St-Zip:	GUAY, MARTIN	RIDGE PKWY, ST 150	
Title: Name: Address: City-St-Zip:	AS (X) [PARK, ALBERT N 4330 PARK TERI WESTLAKE VILL	RACE DR.		Title: Name: Address: City-St-Zip:	()	Change () Addition	
Title: Name: Address: City-St-Zip:	GUAY, MARTÌN	Delete DGE PKWY., SUITE 150 30071		Title: Name: Address: City-St-Zip:	()	Change () Addition	

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: SHEILA HARVEY ACCT 02/21/2007