

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K14872

FILED  
Apr 28, 2009  
Secretary of State

Entity Name: SUNTECH SECURITY SYSTEMS, INC.

## Current Principal Place of Business:

13575 79ST  
FELLSMARE, FL 32948

## New Principal Place of Business:

## Current Mailing Address:

13575 79ST  
FELLSMARE, FL 32948

## New Mailing Address:

FEI Number: 65-0040952

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

RICE, RICHARD  
13575 79ST  
FEILSMERE, FL 32948 US

## Name and Address of New Registered Agent:

RICE, SHIRLEY  
13575 79ST  
FEILSMERE, FL 32948 US

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: SHIRLEY RICE

04/28/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: VTD ( ) Delete  
Name: RICE, SHIRLEY  
Address: 13575 79 ST  
City-St-Zip: FELLSMERE, FL 32948

Title: PSD ( ) Delete  
Name: RICE, RICHARD  
Address: 13575 79 ST  
City-St-Zip: FELLSMERE, FL 32948

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change ( ) Addition  
Name: RICE, MICHAEL  
Address: 13575 79THSTREET  
City-St-Zip: FELLSMERE, FL 32948

Title: PSD (X) Change ( ) Addition  
Name: RICE, SHIRLEY  
Address: 13575 79TH STREET  
City-St-Zip: FELLSMERE, FL 32948

Title: T ( ) Change (X) Addition  
Name: RICE, RICHARD  
Address: 13575 79TH STREET  
City-St-Zip: FELLSMERE, FL 32948

I hereby certify that the information supplied with this filing does not qualify 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: SHIRLEY RICE

VSD

04/28/2009

Electronic Signature of Signing Officer or Director

Date