

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# K82032

FILED  
Mar 12, 2012  
Secretary of State

**Entity Name:** TECHNICAL SURVEILLANCE SCIENCES, INC.

**Current Principal Place of Business:**

% DEANNE L GENTILE  
10141 NW 53 STREET  
SUNRISE, FL 33351

**New Principal Place of Business:**

**Current Mailing Address:**

% DEANNE L GENTILE  
P O BOX 9323  
POMPANO BEACH, FL 33075

**New Mailing Address:**

**FEI Number:** 65-0139140

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

GENTILE, DEANNE L  
2940 SW 22ND AVE. #718  
DELRAY BEACH, FL 33445 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: P/T  
Name: GENTILE, DEANNE L  
Address: 2940 SW 22 AVENUE #718  
City-St-Zip: DELRAY BCH, FL 33445

Title: D  
Name: MCCOY, PEG  
Address: 2481 TWP ROAD, 169  
City-St-Zip: CARDINGTON, OH 43315

Title: V  
Name: WIGGINS, LAURIE  
Address: 2213 E. HOGAN HOLLOW  
City-St-Zip: MARGATE, FL 33063

Title: D  
Name: PATRICIA, PHILLIPS  
Address: P.O. BOX 823  
City-St-Zip: LITCHFIELD,, AZ 85340

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: LAURIE WIGGINS

V

03/12/2012

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

\_\_\_\_\_  
Date