2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000002629

Entity Name: DADE VIDEO SYSTEMS, LLC

FILED Apr 14, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

3211 PONCE DE LEON BLVD. SUITE 301 CORAL GABLES, FL 33134

New Mailing Address: Current Mailing Address:

3211 PONCE DE LEON BLVD. SUITE 301 CORAL GABLES, FL 33134

City-St-Zip:

FEI Number: 30-0187288 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

SHEAR, DAVID REX, BARKER M 3211 PONCE DE LEON 201 ALHAMBRA CIR. SUITE 601

301 CORAL GABLES, FL 33134 CORAL GABLES, FL 33134 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: REX M BARKER 04/14/2004

> Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MEMBERS:

ADDITIONS/CHANGES:

() Delete () Change (X) Addition JOSE, MILTON Name: Name: Address: Address: 3211 PONCE DE LEON City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US Title: Title: MGRM () Change (X) Addition () Delete Name: Name: CECIL, MILTON Address: Address: 3211 PONCE DE LEON City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US Title: () Delete Title: MGRM () Change (X) Addition JOSEPH, MILTON Name: Name: 3211 PONCE DE LEON Address: Address: City-St-Zip: City-St-Zip: CORAL GABLES, FL 33134 US () Change (X) Addition Title: () Delete Title: MGRM Name: Name: FRANK, MILTON Address: Address: 3211 PONCE DE LEON

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 is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes.

City-St-Zip:

CORAL GABLES, FL 33134 US

SIGNATURE: JOSE MILTON 04/14/2004