2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L03000005076

City-St-Zip:

PORT ORANGE, FL 32128

FILED Apr 30, 2004 Secretary of State

Entity Name: ADVANCED BIOMETRIC SOLUTIONS, LLC **Current Principal Place of Business: New Principal Place of Business:** 617 INGHAM ROAD NEW SMYRNA BEACH, FL 32168 **Current Mailing Address: New Mailing Address:** 617 INGHAM ROAD NEW SMYRNA BEACH, FL 32168 FEI Number: 02-0673996 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: WEBSTER, DANIEL J ESQ. 149 SOUTH RIDGEWOOD AVE., SUITE 500 DAYTONA BEACH, FL 32114 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 **MANAGING MEMBERS/MEMBERS: ADDITIONS/CHANGES:** MGRM () Change () Addition () Delete YAMBOR, JULIUS L Name: Name: 617 INGHAM ROAD Address: Address: City-St-Zip: NEW SMYRNA BEACH, FL 32168 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition Name: DAVIS, CURTIS W Name: Address: P.O. BOX 780 Address: City-St-Zip: OSTEEN, FL 32764 City-St-Zip: Title: MGRM () Delete Title: () Change () Addition RAHM, JEFFREY A Name: Name: 1791 ARASH CIRCLE Address: Address:

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:

SIGNATURE: JULIUS YAMBOR CEO 04/30/2004