2004 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
9/10/2004-90062-027-$50.00-$50.00
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SECRETARY OF STATE
TALLAHASSEE FLORIDA
MJH

DOCUMENT # L03000040573

1. Entity Name
RDR SURVEILLANCE SYSTEMS LLC

Principal Place of Business	Mailing Address
2534 TAFT ST. HOLLYWOOD, FL 33020	2534 TAFT ST. HOLLYWOOD, FL 33020

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.: 2261 SW SALMON RD	Suite, Apt. #, etc.: 2261 SW. SALMON RD
City & State: PORT ST LUCIE FLA	City & State: Port St. Lucie FLA
Zip: 34953 Country: USA	Zip: 34953 Country: USA

07062004 Chg-LLC CR2E083 (10/03) 10/20

4. FEI Number — Applied For ☐ Not Applicable ☒

5. Certificate of Status Desired ☐ **$5.00** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORVINO, RALPH 2534 TAFT ST. HOLLYWOOD, FL 33020	Name: RALPH CORVINO Street Address (P.O. Box Number is Not Acceptable): 2261 SW SALMON RD City: PORT ST LUCIE FL Zip Code: 34953

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: RALPH CORVINO MANAGER 8-31-04
Signature, type or print name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $50.00
Due by September 8, 2004

Make check payable to Florida Department of State

9. MANAGING MEMBERS/MANAGERS			10. ADDITIONS/CHANGES		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGER RALPH CORVINO 2261 SW SALMON RD PORT ST LUCIE FLA 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	MANAGER ROY CORVINO 2261 SW SALMON RD PORT ST LUCIE FLA 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	RYAN SPAIDE MANAGER 2402 SW DALOINA RD PORT ST LUCIE FLA 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DOMINIC PALUMBO MANAGER 1985 SW NOTRE DAME RD PORT ST LUCIE FLORIDA 34953	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X REINSTATEMENT 2004 W/O Penalty Fees	☐ Change ☐ Addition

11. I hereby certify that the information supplied with this filing does not qualify 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 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.

SIGNATURE: RALPH CORVINO 8/31/04 954-410-0261
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING MANAGING MEMBER, MANAGER, OR AUTHORIZED REPRESENTATIVE — Date — Daytime Phone #