2006 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# M05000001054

City-St-Zip:

ORLANDO, FL 328093803

Entity Name: CUBIC ADVANCED TACTICAL SYSTEMS, LLC

FILED Apr 05, 2006 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:		
2001 W. OAK RIDGE ROAD ORLANDO, FL 328093803				2001 W. OAK RIDGE ROAD SUITE 200 ORLANDO, FL 328093803		
Current Mailing Address:				New Mailing Address:		
2001 W. OAK RIDGE ROAD ORLANDO, FL 328093803				2001 W. OAK RIDGE ROAD SUITE 200 ORLANDO, FL 328093803		
FEI Number	: 87-0736523	FEI Number Applied For ()	FEI Num	nber Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:		Name and Address	of New Registered Agent:	
1200 SOU PLANTATI	PORATION SYS ITH PINE ISLAN ION, FL 33324	ND ROAD US	ournoso o	f changing its registers	ad office or registered agent, or both	
	e of Florida.	submits this statement for the p	ourpose of	r changing its registere	ed office or registered agent, or both	
SIGNATU						
	Electron	ic Signature of Registered Age	ent		Date	
MANAGING MEMBERS/MANAGERS:				ADDITIONS/CHANGES:		
Title: Name: Address: City-St-Zip:	PCEO () KELLY, MICHAI 9333 BALBOA A SAN DIEGO, CA	VENUE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	S () HOESE, WILLIA 9333 BALBOA A SAN DIEGO, CA	VENUE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () BEN-AMOTZ, O P.O. BOX 2250 HAIFA 31021 IS			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	V () SULIMAN, ISRA P.O. BOX 2250 HAIFA 31021 IS			Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address:	, ,	Delete IRGH, MELISSA IDGE ROAD		Title: Name: Address:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: ORI BEN-AMOTZ V 04/05/2006