

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003718

FILED
Jun 25, 2007
Secretary of State

Entity Name: A.L.A.S. ASOCIACION LATINOAMERICANA DE SEGURIDAD, INC.

Current Principal Place of Business:

1800 SUNSET HARBOR DR
APT 2412
MIAMI BEACH, FL 33193 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 522810
MIAMI, FL 33152

New Mailing Address:

FEI Number: 65-0772307 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

FERRANDO, ANDREA
1800 SUNSET HARBOR DR APT 2412
MIAMI, FL 33193 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: FERRANDO, ANDREA
Address: 1800 SUNSET HARBOR DR APT 2412
City-St-Zip: MIAMI BAECH, FL 33193

Title: D () Delete
Name: FLETCHER, GEORGE
Address: 8460 NW 20TH TERRACE
City-St-Zip: DORAL, FL 33122

Title: D () Delete
Name: DUARTE, PEDRO
Address: 7600 CORPORATE CENTER DRIVE, STE 600
City-St-Zip: MIAMI, FL 33126

Title: D () Delete
Name: DE LA VEGA, HUMBERTO
Address: CIRCUMVALACION OTE 201B DESPACPO 3
City-St-Zip: LEON, MEXICO, TN 37160

Title: D () Delete
Name: EDUARDO, VARGAS
Address: 840 N. WORLD THIRD STREET SUITE 600
City-St-Zip: MILWAUKEE, WI 53203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: FERRANDO ANDREA

ED

06/25/2007

Electronic Signature of Signing Officer or Director

Date