

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000086136

FILED
Apr 30, 2004
Secretary of State

Entity Name: NATIONAL MOUNTED SECURITY CORP.

Current Principal Place of Business:

14540 SW 136TH ST
SUITE 102
MIAMI, FL 33186

New Principal Place of Business:

Current Mailing Address:

14540 SW 136TH ST
SUITE 102
MIAMI, FL 33186

New Mailing Address:

FEI Number: 65-1032232 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MENESES, ILEANA
15451 SW 160 STREET
MIAMI, FL 33187 US

Name and Address of New Registered Agent:

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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: MENESES, NELSON
Address: 15451 SW 160 STREET
City-St-Zip: MIAMI, FL 33187

Title: P (X) Delete
Name: MENESES, ILEANA
Address: 15451 SW 160TH ST
City-St-Zip: MIAMI, FL 33187

Title: P (X) Delete
Name: MENESES, ILEANA
Address: 15451 SW 160TH ST
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Name: MENESES, ILEANA
Address: 15451 SW 160TH ST
City-St-Zip: MIAMI, FL 33187

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DIR (X) Change () Addition
Name: MENESES, ILEANA
Address: 15451 SW 160 STREET
City-St-Zip: MIAMI, FL 33187

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

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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 for the exemption stated in Section 119.07(3)(i), 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ILEANA MENESES

DIR

04/30/2004

Electronic Signature of Signing Officer or Director

_____ Date