2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P00000086136

Entity Name: NATIONAL MOUNTED SECURITY CORP.

FILED Apr 09, 2003 Secretary of State

Current Principal Place of Business:				New Principal Place of Business:			
15451 SW 160 STREET MIAMI, FL 33187				14540 SW 136TH ST SUITE 102 MIAMI, FL 33186			
Current Mailing Address:				New Mailing Address:			
15451 SW 160 STREET MIAMI, FL 33187			14540 SW 136TH ST SUITE 102 MIAMI, FL 33186				
FEI Number:	65-1032232	FEI Number Applied For()	FEI Nun	nber Not Appli	icable ()	Certific	ate of Status Desired (X)
Name and	Address of C	urrent Registered Agent:		Name and	Address of	f New Reg	gistered Agent:
MIAMI, FL The above in the State	160 STREET 33187 US named entity se of Florida.	ubmits this statement for the pu	rpose o	f changing it	s registerec	d office or	registered agent, or both,
SIGNATUF		ic Signature of Registered Agen	.+				 Date
	Licotrom	o oignature of registered Agen					Date
	npaign Financing S AND DIRECT	Trust Fund Contribution(). 「ORS:		ADDITION	S/CHANGE	S TO OF	FICERS AND DIRECTORS
Title: Name: Address: City-St-Zip:	D () MENESES, NEL 15451 SW 160 S MIAMI, FL 3318	STREET		Title: Name: Address: City-St-Zip:	VP MENESES, N 15451 SW 1 MIAMI, FL 3	60 STREET	() Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P MENESES, I 15451 SW 1 MIAMI, FL 3	60TH ST	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P MENESES, I 15451 SW 1 MIAMI, FL 3	60TH ST	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P MENESES, I 15451 SW 1 MIAMI, FL 3	60TH ST	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P MENESES, I 15451 SW 1 MIAMI, FL 3	60TH ST	(X) Addition
Title: Name: Address: City-St-Zip:	()	Delete		Title: Name: Address: City-St-Zip:	P MENESES, I 15451 SW 1 MIAMI, FL 3	60TH ST	(X) Addition

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 P 04/09/2003