

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000017447

FILED
Jan 29, 2007
Secretary of State

Entity Name: PRO-LIFT FINGERPRINT COLLECTION SYSTEM, INC.

Current Principal Place of Business:

7075 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228

New Principal Place of Business:

3609 15TH AVENUE WEST
BRADENTON, FL 34205

Current Mailing Address:

7075 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228

New Mailing Address:

3609 15TH AVENUE WEST
BRADENTON, FL 34205

FEI Number: 65-1089968

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MASSIMO, LINDA L
7075 LONGBOAT KEY
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

MASSIMO, LINDA L
3609 15TH AVENUE WEST
BRADENTON, FL 34205 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: _____

01/29/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MASSIMO, LINDA L
Address: 7075 LONGBOAT KEY
City-St-Zip: LONGBOAT, FL 34228

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: MASSIMO, LINDA L
Address: 3609 15TH AVENUE WEST
City-St-Zip: BRADENTON, FL 34205

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 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: LINDA L. MASSIMO

MS

01/29/2007

Electronic Signature of Signing Officer or Director

Date