2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 05, 2007
Secretary of State

DOCUMENT# P01000053726

Entity Name: SUAREZ FIRE SYSTEMS, INC.

Current Principal Place of Business:

3104 CHERRY PALM DR, SUITE 230
TAMPA, FL 33619

New Principal Place of Business:

Current Mailing Address:

3104 CHERRY PALM DR, SUITE 230
TAMPA, FL 33619

New Mailing Address:

FEI Number: 59-3722877 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SUAREZ, JAMES A
817 N BANNOCKBURN AVE
TEMPLE TERRACE, FL 33617 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: P ( ) Delete
Name: SUAREZ, JAMES A
Address: 817 N BANNOCKBURN AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: ST ( ) Delete
Name: SUAREZ, SONIA F
Address: 817 N BANNOCKBURN AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VP ( ) Delete
Name: REINALDO, RAMOS O
Address: 24831 HYDE PARK BLVD
City-St-Zip: LAND O' LAKES, FL 34639 US

Title: AST ( ) Delete
Name: HAYWOOD, PATRICIA L
Address: 10504 FORE DRIVE
City-St-Zip: TAMPA, FL 33612

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:

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: PATRICIA L. HAYWOOD MRS 02/05/2007

Electronic Signature of Signing Officer or Director — Date