

FILED
Jun 12, 2003 8:00 am
Secretary of State

06-12-2003 90008 021 ***150.00

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000101135 1. Entity Name AMERICA'S PERSONAL SECURITY INC.					
Principal Place of Business 228 DOLPHIN POINT 3 CLEARWATER, FL 33767		Mailing Address 228 DOLPHIN POINT 3 CLEARWATER, FL 33767			
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip Country		Zip Country			
4. FEI Number 58-3749267				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent FISHMAN, STEVEN M ESQ 3135 S.R. 580 11 SAFETY HARBOR, FL 34695				7. Name and Address of New Registered Agent Name CHRISTINA KEELING Street Address (P.O. Box Number is Not Acceptable) 228 DOLPHIN PT. #3 City CLEARWATER FL 33767	
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE <u>Christina Keeling</u> DATE <u>June 6th /03</u>					
FILE NOW!! / FEE IS \$160.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P KEELING, CHRISTINA G 228 DOLPHIN POINT #3 CLEARWATER, FL 33767	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP ABRAMS, GLORIA 1600 GULF BLVD SUITE #714 CLEARWATER, FL 33767	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LAROCHÉ, KATHLEEN 841 HILLSIDE DR PALM HARBOR, US 34683	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	[Empty]	<input type="checkbox"/> Delete			
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <u>Christina Keeling</u> CHRISTINA KEELING <u>06/06/03</u>					

90139404

CHECK HERE IF MAKING CHANGES

CR20034 (10/02)

727-443-6603



Attachment
90139404

PO1000101135

America's Personal Security Inc.

"Leading Edge Technology
Life Safety & Biometric Security"

To whom it may concern,

06/06/03

On June 5th 2003 I contact your office for questions on Report Filings, to inquire about the report filed by my company in March.

Our company had not yet received the verification that our check paid to the State had been cashed. This check was mailed back on March 28th, 2003 along with our original paper work for filing:

The person I spoke with forwarded me to another office, tel # 850-245-6059, in which I spoke with a gentleman by the name of Jason. Jason informed me that your offices had not received my original filing and to just go ahead and print the form from SunBiz.org and resubmit it along with another check for \$150.00

I am a little worried that his response seemed so unconcerned. I asked what would happen if you received my original paperwork and check and was informed that I would receive a credit with the State.

I am including a photo copy of the series of checks written around the time frame of the original filing fee for your records. I would also like to know if you have received this letter, form and payment. You may reach me at 727-443-6603 Mon to Friday 9am to 6pm.

Thank you in advance for your time,
Christina Keeling, President
America's Personal Security Inc.

Christina Keeling

Attachment 90139404

PO1000101135

BALANCE FORWARD		0596	
DATE	04/03/03		
TO	Christine		
03-19-03-26			
FOR		SUB-TOTAL	
		THIS CHECK	
		OTHER TRANSACTION + OR -	500 -
<input type="checkbox"/> TAX DEDUCTIBLE		BANK BALANCE	

BALANCE FORWARD		0593	
DATE	03/26/03		
TO	Mail Boxes Etc		
FOR		SUB-TOTAL	
		THIS CHECK	
		OTHER TRANSACTION + OR -	
<input type="checkbox"/> TAX DEDUCTIBLE		BANK BALANCE	

BALANCE FORWARD		0597	
DATE	U.S.P.S		
TO			
FOR		SUB-TOTAL	
		THIS CHECK	55 60
		OTHER TRANSACTION + OR -	
<input type="checkbox"/> TAX DEDUCTIBLE		BANK BALANCE	

BALANCE FORWARD		0594	
DATE	03/28/03		
TO	Bonnie Shearer		
Book Keeping Service			
FOR		SUB-TOTAL	
		THIS CHECK	120 -
		OTHER TRANSACTION + OR -	
<input type="checkbox"/> TAX DEDUCTIBLE		BANK BALANCE	

BALANCE FORWARD		0598	
DATE	04/04/03		
TO	Bonnie Shearer		
FOR	Bookkeeping	SUB-TOTAL	
		THIS CHECK	240 -
		OTHER TRANSACTION + OR -	
<input type="checkbox"/> TAX DEDUCTIBLE		BANK BALANCE	

BALANCE FORWARD		0595	
DATE	03/28/03		
TO	Fl. Dept of State		
Uniform B. Report			
FOR		SUB-TOTAL	
		THIS CHECK	150 00
		OTHER TRANSACTION + OR -	
<input type="checkbox"/> TAX DEDUCTIBLE		BANK BALANCE	