**FILED** 

## **2002 UNIFORM BUSINESS REPORT (UBR)**

DOCUMENT # P01000106443  1. Entity Name ALL TECH SECURITY, INC.					Jan 29, 2002 8:00 am Secretary of State 01-29-2002 90062 027 ***150.00			J/05 AV
Principal Place of Business  188 SANDPIPER AVENUE ROYAL PALM BEACH FL 33411  Mailing Address  188 SANDPIPER AVENUE ROYAL PALM BEACH FL 33411						N 11811 88118 81111 81311		
2. Principal Place of Business 3040 S. military Tr. 3040 S. milit Suite, Apt. #, etc. Suite B  3. Mailing Address 3040 S. milit Suite, Apt. #, etc. Suite B				y Tr.	DO NOT WRITE IN		<b>1:131</b>   1:1   1 <b>:1</b>	
City & State Lake Zip	worth, fl	City & State Lake Word	わ, FL Country		4. FEI Number 65-1153134	No.	oplied For ot Applicable	
3346	3 PU.S.A.	33463	Ü,S,	A.	5. Certificate of Status Desired	] \$8.75 Add Fee Require		
	6. Name and Address of Current F	Registered Agent	Nan		7. Name and Address of New Regist	ered Agent		
ROBINSON, DAVID 188 SANDPIPER AVENUE				Street Address (P.O. Box Number is Not Acceptable)				
ROYAL PALM BEACH FL 33411								
		_	City			FL Zip Cod	е	Ì
8. The above	names entity submits this statement for	the purpose of changing its re	egistered offic	e or registered		-14-02		
SIGNATURE	Signature, typed or printed name of registered agent at	nd title if applicable. (NOTE: F	Registered Agent s	ignature required wh		DATE		
Tax filing h	oration is eligible to satisfy its Intangible equirement and elects to do so. ia on back)	FILE NOW!!! After May 1, 2002 Make Check Payable	Fee will b	\$550.00	Election Campaign Financin     Trust Fund Contribution.	· — +0.0	00 May Be d to Fees	
11.	OFFICERS AND D		12.	15.5	ADDITIONS/CHANGES TO OFFICERS			<u> </u>
NAME STREET ADDRESS	-D Robinson, David 188 Sandpiper Avenue Royal Palm Beach Fl 33411	🔼 Delete	NAME STREET ADDR	SS QQ S	d.T. Robinson sandpiper Ave	☑ Change	Addition	32E034 (9/01)
CITY-ST-ZIP TITLE	NOTAL FALM BEACH FL 33411	☐ Delete	CITY-ST-ZIP	V.P.	jal Palm Beach,	Change	<b>∑</b> Addition	CR2E
NAME STREET ADDRESS		_ Dolote	NAME STREET ADDRI		nda Robinson Sandpiper Ave 11 Palm-Beach, F1	onango	E TOURS	ı
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP	Roya	u Palm-Islach, H	33411~ ☐ Change	Addition	i
NAME STREET ADORESS CITY-ST-ZIP		□ Delete	NAME STREET ADDRE	ess		Onlings	Addition	
TITLE NAME STREET ADDRESS		☐ Delete	TITLE NAME STREET ADDRI	SS		☐ Change	☐ Addition	
CITY-ST-ZIP TITLE		☐ Delete	CITY-ST-ZIP TITLE			☐ Change	☐ Addition	
NAME STREET ADDRESS CITY-ST-ZIP			NAME STREET ADDRE CITY-ST-ZIP	ss				
TITLE NAME		☐ Delete	TITLE NAME			☐ Change	Addition	
STREET ADDRESS : CITY-ST-ZIP			STREET ADORE	SS				
<ol> <li>I hereby c indicated of the corr changed.</li> </ol>	ertify that the information supplied with ton this report or supplemental report is coration or the receiverfor trustee empor or an attachment with an address, w	his filing does not qualify for the rue and accurate and that my yored to execute this report as the all other like embowered.	ne exemption signature sha required by	stated in Sectional have the san Chapter 607, F		er certify that the in nat I am an officer ears in Block 11 or	iformation or director Block 12 if	÷
SIGNAT		INTED NAME OF SIGNING OFFICER OR	DIRECTOR		1-14-02 Date	56 -663 Daytime Phone #	1618	