2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000067728

FILED Jan 13, 2006 Secretary of State

Entity Name: MESA SECURITY & COMMUNI	ICATIONS, INC.
Current Principal Place of Business:	New Principal Place of Business:
PO BOX 14423 TAMPA, FL 33690	PO BOX 10118 TAMPA, FL 33679
Current Mailing Address:	New Mailing Address:
PO BOX 14423 TAMPA, FL 33690	PO BOX 10118 TAMPA, FL 33679
FEI Number: 36-4499230 FEI Number Applied Fo	or () FEI Number Not Applicable () Certificate of Status Desired ()
Name and Address of Current Registered A	gent: Name and Address of New Registered Agent:
MESA, SHAWN 3707 W CASS ST TAMPA, FL 33609 US	
The above named entity submits this statement in the State of Florida.	for the purpose of changing its registered office or registered agent, or both,
SIGNATURE:	
Electronic Signature of Registe	ered Agent Date
Election Campaign Financing Trust Fund Contribution	ı ().
OFFICERS AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS
Title: O () Delete Name: MESA, SHAWN	Title: O (X) Change()Addition Name: MESA. SHAWN

Name: MESA, SHAWN PO BOX 14423 Address: City-St-Zip: TAMPA, FL 33690

Title: () Delete MESA, ORESTE JR Name: Address: PO BOX 14423 TAMPA, FL 33690 City-St-Zip:

PO BOX 10118 City-St-Zip: TAMPA, FL 33679 Title: (X) Change () Addition

MESA, ORESTE JR Name: Address: PO BOX 10118 City-St-Zip: TAMPA, FL 33679

Address:

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: SHAWN MESA 0 01/13/2006