2007 FOR PROFIT CORPORATION **ANNUAL REPORT**

FILED Apr 16, 2007 08:00 AM DOCUMENT # P02000082226 **Secretary of State** ROBOTIC SECURITY SYSTEMS, INC. Principal Place of Business Mailing Address 6530 E HWY 22 6530 E HWY 22 PANAMA CITY, FL 32404 PANAMA CITY, FL 32404 02072007 No Chg-P CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 16-1618677 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BLAIR, JOEY W DO NOT WRITE 211 N. MARY ELLA AVE. PANAMA CITY, FL 32404 IN THIS SPACE 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 Sgnature, typed or printed name of registered egent and trie if applicable (NOTE: Registered Agent aignature required when reinstating) DATE FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE TURPIN, ROBERT R NAME STREET ADDRESS 6514 BOAT RACE RD. C/TY-ST-ZIP PANAMA CITY, FL 32404 PS TITLE NAME BLAIR, JOEY W STREET AODRESS 219 N. MARY ELLA AVE. CITY-ST-ZIP PANAMA CITY, FL 32404 BLAIR, JEREMY M NAME STREET ADDRESS 219 N. MARY ELLA AVE. DO NOT WRITE CITY-ST-ZIP PANAMA CITY, FL 32404 TITLE IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP TITLE

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 eppowered.

SIGNATURE:

NAME STREET ADDRESS CITY-ST-ZIP TITLE

STREET ADDRESS

Blair 4-12-07 (850)871-9300

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