

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000111775

Entity Name: SECURITY HOLOGRAM, INC.

FILED  
Jan 04, 2007  
Secretary of State

## Current Principal Place of Business:

14790 BONAIRE BLVD  
#302  
DELRAY BEACH, FL 33446

## New Principal Place of Business:

## Current Mailing Address:

14790 BONAIRE BLVD  
#302  
DELRAY BEACH, FL 33446

## New Mailing Address:

FEI Number: 55-0802505      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

GINZBURG, ROBERT  
14790 BONAIRE BLVD  
#302  
DELRAY BEACH, FL 33446 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: GINZBURG, ROBERT PRESIDE  
Address: 14790 BONAIRE BLVD  
City-St-Zip: DELRAY BEACH, FL 33446

Title: T ( ) Delete  
Name: GINZBURG, LARISA TRES  
Address: 14790 BONAIRE BLVD. # 302  
City-St-Zip: DELRAY BEACH, FL 33446

Title: CEO ( ) Delete  
Name: HARTH, KAREN  
Address: 761 BIGHORN DRIVE  
City-St-Zip: CHANHASSEN, MN 55317

## 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:

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: ROBERT GINZBURG

P

01/04/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date