

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000114822

Entity Name: VISION FIRE & SECURITY, INC.

FILED
Apr 30, 2009
Secretary of State

Current Principal Place of Business:

4053 PETERS RD.
5
PLANTATION, FL 33317

Current Mailing Address:

4053 PETERS RD.
5
PLANTATION, FL 33317

New Principal Place of Business:

2860 W STATE ROAD 84
116-237
FORT LAUDERDALE, FL 33312

New Mailing Address:

2860 W STATE ROAD 84
116-237
FORT LAUDERDALE, FL 33312

FEI Number: 43-1983990

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ALVIS, KYLE L P
4053 PETERS RD
5
PLANTATION, FL 33317 US

Name and Address of New Registered Agent:

ALVIS, KYLE L P
2860 W STATE ROAD 84
116-237
FORT LAUDERDALE, FL 33312 US

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: KYLE ALVIS

04/30/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DPS () Delete
Name: ALVIS, KYLE L DPS
Address: 4053 PETERS RD. #5
City-St-Zip: PLANTATION, FL 33317

Title: O () Delete
Name: DENNIS, CASEY O
Address: 5200 NORTH FEDERAL HIGHWAY #21101
City-St-Zip: FORT LAUDERDALE, FL 33308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DPS (X) Change () Addition
Name: ALVIS, KYLE L DPS
Address: 2860 W STATE ROAD 84 #116-237
City-St-Zip: FORT LAUDERDALE, FL 33312

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: KYLE ALVIS

DPS

04/30/2009

Electronic Signature of Signing Officer or Director

Date