

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000130891

FILED
Jan 15, 2008
Secretary of State

Entity Name: FOURTH DIMENSION SECURITIES, INC.

Current Principal Place of Business:

1110 N.E. PINE ISLAND RD
UNIT 3, PARK 1110
CAPE CORAL, FL 33909 US

Current Mailing Address:

1110 N.E. PINE ISLAND RD
UNIT 3, PARK 1110
CAPE CORAL, FL 33909 US

New Principal Place of Business:

14965 TECHNOLOGY COURT
UNITS 3-6
FORT MYERS, FL 33912 US

New Mailing Address:

14965 TECHNOLOGY COURT
UNITS 3-6
FORT MYERS, FL 33912 US

FEI Number: 04-3734498

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HIDE, LEE MR
1110 N.E. PINE ISLAND RD
UNIT 3, PARK 1110
CAPE CORAL, FL 33909 US

Name and Address of New Registered Agent:

HIDE, LEE MR
14965 TECHNOLOGY COURT
UNITS 3-6
FORT MYERS, FL 33912 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:

01/15/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: HIDE, LEE MR
Address: PO BOX 19
City-St-Zip: RYE, EAST SUSSEX, SX TN31 6WZ UK

Title: V () Delete
Name: HIDE, RACHAL E MRS
Address: PO BOX 19
City-St-Zip: RYE, EAST SUSSEX, SX TN31 6WZ UK

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 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: L HIDE

V

01/15/2008

Electronic Signature of Signing Officer or Director

Date