2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2004
Secretary of State

DOCUMENT# P03000018674

Entity Name: TAMPERPROOF IDENTIFICATION COMPANY

Current Principal Place of Business:

5509 CAMILLE CT.
LUTZ, FL 33558

New Principal Place of Business:

5509 CAMILLE CT.
LUTZ, FL 33558 US

Current Mailing Address:

5509 CAMILLE CT.
LUTZ, FL 33558

New Mailing Address:

5509 CAMILLE CT.
LUTZ, FL 33558 US

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

FILINGS, INC.
3732 NW 16TH ST
FT LAUDERDALE, FL 33311 US

Name and Address of New Registered Agent:

MANN, ROBERT L D
5509 CAMILLE CT.
LUTZ, FL 33558 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: ROBERT L MANN 03/01/2004
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MANN, ROBERT L
Address: 5509 CAMILLE CT.
City-St-Zip: LUTZ, FL 33558

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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 Section 119.07(3)(i), 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 L MANN D 03/01/2004
Electronic Signature of Signing Officer or Director Date