## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P03000054709

Entity Name: FLECTRONIC ALARM SYSTEMS INC

FILED Apr 02, 2004 Secretary of State

Entity Na	ime: ELECTR	ONIC ALARM SYSTEMS, INC	<b>).</b>		
Current Principal Place of Business:			New Principal Place of Business:		
18149 NE NORTH N	E 19 AVE. MAMI BEACH,	FL 33162			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
18149 NE NORTH N	E 19 AVE. MAMI BEACH,	FL 33162			
FEI Number	r: <b>75-311613</b> 9	FEI Number Applied For ( )	FEI Number Not Applicable ( )	Certificate of Status Desired (X)	
Name and	d Address of	Current Registered Agent:	Name and Address of	of New Registered Agent:	
101 ATIQI APT, 5 CORAL G	A, EDGAR UERA AVE. 6ABLES, FL 33 e named entity e of Florida.		purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Ag	gent	Date	
Election Ca	mpaign Financir	ng Trust Fund Contribution ( ).			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	SANABRIA, ÈI 101 ANTIQUEI	) Delete DGAR RA AVE. APT 5 ES, FL 33134 US	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	ARIAS, RAUL 2049 NE 181 S	) Delete ST. BEACH, FL 33162 US	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: EDGAR SANABRIA P 04/02/2004