

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000076474

FILED  
Jan 29, 2006  
Secretary of State

**Entity Name:** PUBLIC SAFETY EQUIPMENT & INSTALLATIONS, INC.

**Current Principal Place of Business:**

8345 NW 68TH STREET  
MIAMI, FL 33166

**New Principal Place of Business:**

1305 NW 155TH DRIVE  
MIAMI, FL 33169

**Current Mailing Address:**

P.O. BOX 423  
DANIA BEACH, FL 33004

**New Mailing Address:**

1305 NW 155TH DRIVE  
MIAMI, FL 33169

**FEI Number:** 02-0700204

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

PERSAD, GITA  
11808 NW 13 ST  
PEMBROKE PINES, FL 33026 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: PERSAD, GITA  
Address: 11808 NW 13 ST  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: ST ( ) Delete  
Name: PERSAD, GLENN  
Address: 11808 NW 13 ST  
City-St-Zip: PEMBROKE PINES, FL 33026

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D ( ) Change (X) Addition  
Name: PERSAD, GABRINA T  
Address: 11808 NW 13TH STREET  
City-St-Zip: PEMBROKE PINES, FL 33026

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:** GITA PERSAD

P

01/29/2006

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

\_\_\_\_\_  
Date