

2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000119876

FILED
Jan 26, 2004
Secretary of State

Entity Name: POINT 40 SECURITY SOLUTION, INC.

Current Principal Place of Business:

3446 FERNWOOD DR.
KISSIMMEE, FL 34741

New Principal Place of Business:

8907 CITRUS VILLAGE DR.
APT. #205
TAMPA, FL 33626

Current Mailing Address:

3446 FERNWOOD DR.
KISSIMMEE, FL 34741

New Mailing Address:

8907 CITRUS VILLAGE DR.
APT. #205
TAMPA, FL 33626

FEI Number: 11-3706860

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

JACQUES, FAY I
3446 FERNWOOD DR.
KISSIMMEE, FL 34741 US

Name and Address of New Registered Agent:

ORTIZ, MAGLI J SEC
8907 CITRUS VILLAGE DR.
APT. #205
TAMPA, FL 33626 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: MAGLI J. ORTIZ

01/26/2004

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: JACQUES, FAY I
Address: 3446 FERNWOOD DR.
City-St-Zip: KISSIMMEE, FL 34741

Title: D () Delete
Name: ORTIZ, VICENTE
Address: 3446 FERNWOOD DR.
City-St-Zip: KISSIMMEE, FL 34741

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: ORTIZ, MAGLI J SEC
Address: 8907 CITRUS VILLAGE DR.
City-St-Zip: TAMPA, FL 33626

Title: D (X) Change () Addition
Name: ORTIZ, VICENTE PRES
Address: 8907 CITRUS VILLAGE DR.
City-St-Zip: TAMPA, FL 33626

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: MAGLI J. ORTIZ

SEC.

01/26/2004

Electronic Signature of Signing Officer or Director

Date