2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000121527

OF OUR TY REPORT INTIL INC

FILED Feb 13, 2006 Secretary of State

Entity Name: SECURI	ITY DEPOT IN I'L., INC.		
Current Principal Plac	e of Business:	New Principal Place of Business:	
3399 NW 72ND AVE MIAMI, FL 33122			
Current Mailing Address:		New Mailing Address:	
3399 NW 72ND AVE MIAMI, FL 33122			
FEI Number: 11-3707144	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:		Name and Address of New Registered Agent:	
SPIEGEL & UTRERA, F 1840 SW 22ND ST. 4TH FLOOR MIAMI, FL 33145 US	P.A.		
The above named entity in the State of Florida.	submits this statement for the p	purpose of changing its registered	office or registered agent, or both,
SIGNATURE:			
Electro	onic Signature of Registered Ag	ent	Date
Election Campaign Financi	ng Trust Fund Contribution ().		
OFFICEDS AND DIDE	CTOR:	ADDITIONS/CHANCE	S TO OFFICERS AND DIRECTOR

DFFICERS AND DIRECTORS:

6442 SW 37TH ST

MIAMI, FL 33155

Address:

City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: (X) Change () Addition JIMENEZ, JUAN JIMENEZ, JUAN Name: Name: 8906 W. FLAGLER ST. #209 6442 SW 37TH ST Address: Address: City-St-Zip: MIAMI, FL 33155 City-St-Zip: MIAMI, FL 33174 Title: VD () Delete Title: VD (X) Change () Addition JIMENEZ, LUCY JIMENEZ, LUCY Name: Name: Address: 6442 SW 37TH ST Address: 8906 W. FLAGLER ST. #209 MIAMI, FL 33155 MIAMI, FL 33174 City-St-Zip: City-St-Zip: Title: Title: (X) Delete SC () Change () Addition Name: JIMENEZ, BRIÁNA Name:

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.

Address:

City-St-Zip:

SIGNATURE: JUAN JIMENEZ PD 02/13/2006