2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000152958

Entity Name: DEFENSIVE DATA SOLUTIONS INC.

20752 SW 83RD AVE

MIAMI, FL 33189 US

Address:

City-St-Zip:

FILED Apr 30, 2007 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 10775 NW 29TH MANOR UNIT #1 SUNRISE, FL 33322 **New Mailing Address: Current Mailing Address:** 10775 NW 29TH MANOR UNIT #1 SUNRISE, FL 33322 US FEI Number: 20-0770321 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: COHEN, JASON M 10775 NW 29TH MANOR UNIT #1 SUNRISE, FL 33322 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: Electronic Signature of Registered Agent Date Election Campaign Financing Trust Fund Contribution (). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete Title: () Change () Addition COHEN, JASON M Name: Name: 10775 NW 29TH MANOR, UNIT #1 Address: Address: City-St-Zip: SUNRISE, FL 33322 US City-St-Zip: Title: VΡ () Delete Title: () Change () Addition AGUIRRE, CARLOS Name: Name:

Address:

City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: JASON COHEN P 04/30/2007