

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028271

FILED
Apr 28, 2005
Secretary of State

Entity Name: PINES POLICE SUPPLY, INC.

Current Principal Place of Business:

1408 NW 208TH WAY
PEMBROKE PINES, FL 33029

New Principal Place of Business:

911 NW 209 AVE
109
PEMBROKE PINES, FL 33029 US

Current Mailing Address:

1408 NW 208TH WAY
PEMBROKE PINES, FL 33029

New Mailing Address:

911 NW 209 AVE
109
PEMBROKE PINES, FL 33029 US

FEI Number: 33-1084362

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

ZAMORA, LUCY A
1408 NW 208TH WAY
PEMBROKE PINES, FL 33029 US

Name and Address of New Registered Agent:

ZAMORA, LUCY A
911 NW 209 AVE
109
PEMBROKE PINES, FL 33029 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: LUCY ANNE ZAMORA

04/28/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ZAMORA, LUCY A
Address: 1408 NW 208TH WAY
City-St-Zip: PEMBROKE PINES, FL 33029

Title: V () Delete
Name: ZAMORA, RUBEN
Address: 1408 NW 208TH WAY
City-St-Zip: PEMBROKE PINES, FL 33029

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

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: V () Change (X) Addition
Name: ZAMORA, REYNOLD SR.
Address: 1408 NW 208 WAY
City-St-Zip: PEMBROKE PINES, FL 33029 US

Title: V () Change (X) Addition
Name: ZAMORA, MARIA
Address: 230 LAKEVIEW DRIVE #9-111
City-St-Zip: WESTON, FL 33326 US

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: REYNOLD ZAMORA SR.

V

04/28/2005

Electronic Signature of Signing Officer or Director

Date