

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000030112

FILED  
Apr 05, 2006  
Secretary of State

**Entity Name:** FEDERAL SPECIAL RESPONSE SECURITY, INC.

**Current Principal Place of Business:**

12853 SW 210TH TERRACE  
MIAMI, FL 33177

**New Principal Place of Business:**

4682 US 27TH SOUTH  
SEBRING, FL 33870

**Current Mailing Address:**

12853 SW 210TH TERRACE  
MIAMI, FL 33177

**New Mailing Address:**

P.O. BOX 2383  
LAKE PLACID, FL 33862

**FEI Number:** 20-0740717

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

SPIEGEL & UTRERA, P.A.  
1840 SW 22ND ST.  
4TH FLOOR  
MIAMI, FL 33145 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: PSTD ( ) Delete  
Name: LOPEZ, GLORIA I  
Address: 12853 SW 210TH TERRACE  
City-St-Zip: MIAMI, FL 33177

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

Title: PSTD (X) Change ( ) Addition  
Name: LOPEZ, GLORIA I  
Address: P.O. BOX 2383  
City-St-Zip: LAKE PLACID, FL 33862

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:** GLORIA I. LOPEZ

PSTD

04/05/2006

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

\_\_\_\_\_  
Date