

# **2005 FOR PROFIT CORPORATION REINSTATEMENT**

DOCUMENT# P04000038150

**FILED**  
**Nov 02, 2005**  
**Secretary of State**

**Entity Name:** 1ST CLASS SECURITY PARTNERS, INC.

**Current Principal Place of Business:**

6095 NW 8TH STREET  
MARGATE, FL 33063

**New Principal Place of Business:**

**Current Mailing Address:**

6095 NW 8TH STREET  
MARGATE, FL 33063

**New Mailing Address:**

10918 HIDDEN LAKE PLACE  
BOCA RATON, FL 33498

**FEI Number:**                      **FEI Number Applied For (X)**                      **FEI Number Not Applicable ( )**                      **Certificate of Status Desired ( )**

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

WILLIAMS, KEVIN A  
6095 NW 8TH STREET  
MARGATE, FL 33063    US

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

WILLIAMS, KEVIN A  
10918 HIDDEN LAKE PLACE  
BOCA RATON, FL 33498    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: KEVIN WILLIAMS

11/02/2005

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title:            P            ( ) Delete  
Name:          WILLIAMS, KEVIN A  
Address:       6095 NW 8TH STREET  
City-St-Zip:   MARGATE, FL 33063

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

Title:            P            (X) Change ( ) Addition  
Name:          WILLIAMS, KEVIN A  
Address:       10918 HIDDEN LAKE PLACE  
City-St-Zip:   BOCA RATON, FL 33498

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: KEVIN A WILLIAMS

P

11/02/2005

Electronic Signature of Signing Officer or Director

Date