

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000052425

Entity Name: STATE SECURITY SERVICES, INC.

FILED
Aug 21, 2009
Secretary of State

Current Principal Place of Business:

807 SW 25TH AVE.
SUITE 207
MIAMI, FL 33135

New Principal Place of Business:

1830 NW 7 ST
SUITE 225
MIAMI, FL 33125

Current Mailing Address:

807 SW 25TH AVE.
SUITE 207
MIAMI, FL 33135

New Mailing Address:

P.O. BOX 260295
MIAMI, FL 33126

FEI Number: 55-0860569

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

GARCIA, RAUL
495 NW 72 AV
APT# 306
MIAMI, FL 33126 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

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: GARCIA, RAUL
Address: 807 SW 25TH AVE SUITE 207
City-St-Zip: MIAMI, FL 33135

Title: VP () Delete
Name: DELOS ANGELES GARCIA, SANTOS
Address: 807 SW 25TH AVE SUITE 207
City-St-Zip: MIAMI, FL 33135

Title: VP (X) Delete
Name: VEGA, GILBERTO
Address: 807 SW 25TH AVE SUITE 207
City-St-Zip: MIAMI, FL 33135

Title: VP (X) Delete
Name: GARCIA, BARBARA M
Address: 807 SW 25TH AVE SUITE 207
City-St-Zip: MIAMI, FL 33135

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: GARCIA, RAUL
Address: 495 NW 72 AVE APT 306
City-St-Zip: MIAMI, FL 33126

Title: VP (X) Change () Addition
Name: GARCIA, SANTOS A
Address: 495 NW 72 AVE APT 306
City-St-Zip: MIAMI, FL 33126

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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: RAUL GARCIA

P

08/21/2009

Electronic Signature of Signing Officer or Director

Date