

Rx Date/Time JUN-05-2006(MON) 14:25  
06/05/2006 14:20 9544734129

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**FILED**  
**Jun 12, 2006 8:00 am**  
**Secretary of State**

06-12-2006 90001 018 \*\*\*150.00

**2006 FOR PROFIT CORPORATION  
ANNUAL REPORT**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                |                                                                                                                                                                                                                 |                                                                                                                                                            |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>DOCUMENT # P04000084692</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                |                                                                                                                                |                                                                                                                                                            |
| 1. Entity Name<br><b>CRIME CONTROL OF AMERICA INC.</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |                                                                                                |                                                                                                                                                                                                                 |                                                                                                                                                            |
| Principal Place of Business<br><b>2423 SW 147 AVE #210<br/>MIAMI, FL 33185</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                | Mailing Address<br><b>2423 SW 147 AVE #210<br/>MIAMI, FL 33185</b>                                                                                                                                              |                                                                                                                                                            |
| 2. Principal Place of Business<br><b>2635 SW 151st Ave</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                | 3. Mailing Address<br><b>2635 SW 151st Ave</b>                                                                                                                                                                  |                                                                                                                                                            |
| Suite, Apt. #, etc.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                | Suite, Apt. #, etc.                                                                                                                                                                                             |                                                                                                                                                            |
| City & State<br><b>Miami</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                | City & State<br><b>Miami</b>                                                                                                                                                                                    |                                                                                                                                                            |
| Zip<br><b>33185</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                | Zip<br><b>33185</b>                                                                                                                                                                                             |                                                                                                                                                            |
| Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                | Country                                                                                                                                                                                                         |                                                                                                                                                            |
| 4. FEI Number<br><b>20-1278907</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                | Applied For<br><input type="checkbox"/> Not Applicable                                                                                                                                                          |                                                                                                                                                            |
| 5. Certificate of Status Designation<br><input type="checkbox"/> \$8.75 Additional Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                | 06052006 Chg-P CR2E034 (11/05)                                                                                                                                                                                  |                                                                                                                                                            |
| 6. Name and Address of Current Registered Agent<br><b>CASTILLO, MARY<br/>2635 S.W. 151ST AV<br/>MIAMI, FL 33185</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                          |                                                                                                | 7. Name and Address of New Registered Agent<br>Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>City<br><b>FL</b> Zip Code                                                                         |                                                                                                                                                            |
| 8. 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. I am familiar with, and accept the obligations of registered agent.                                                                                                                                                                                                                                                                                                                                                                                                                |                                                                                                |                                                                                                                                                                                                                 |                                                                                                                                                            |
| SIGNATURE<br>Signature, typed or printed name of registered agent and file # applicable. (NOTE: Registered Agent signature required when reappointing) DATE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                |                                                                                                                                                                                                                 |                                                                                                                                                            |
| FILE NOW!!! FEE IS \$150.00<br>Due by September 8, 2006                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                      |                                                                                                | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees<br>In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. |                                                                                                                                                            |
| 10. OFFICERS AND DIRECTORS                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11                                                                                                                                                           |                                                                                                                                                            |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | PTS<br>CASTILLO, MARY<br>2635 S.W. 151ST AV<br>MIAMI, FL 33185 <input type="checkbox"/> Delete | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                              | VICE-PRESIDENT<br>CASTILLO, MARY<br>2635 SW 151st Ave 33185 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition                   |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                              | PRESIDENT, SECRETARY<br>RAFAEL FERNANDEZ<br>2635 S.W. 151 AV. MIAMI, FL 33185 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                          |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | <input type="checkbox"/> Delete                                                                | TITLE<br>NAME<br>STREET ADDRESS<br>CITY - ST - ZIP                                                                                                                                                              | <input type="checkbox"/> Change <input type="checkbox"/> Addition                                                                                          |
| 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. |                                                                                                |                                                                                                                                                                                                                 |                                                                                                                                                            |
| SIGNATURE: <b>Mary Castillo</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                | Date <b>6/5/06</b> 3:25-406                                                                                                                                                                                     |                                                                                                                                                            |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                | Date                                                                                                                                                                                                            |                                                                                                                                                            |

Rx Date/Time JUN-05-2006(MON) 14:25

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C.P.A OFFICE

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ATTACHMENT

40095183

Crime Control of America, Inc.  
2635 S.W. 151<sup>st</sup> Avenue  
Miami, FL 33185

June 5, 2006

Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

RE: Crime Control of America, Inc.

EIN # 20-1278907

Doc. # P04000084692

Dear Sirs,

We did not receive notification of our 2006 Annual Report due to our change of address. It was inadvertently sent to our old address.

Please accept our check in the amount of \$150 for our 2006 Annual Report.

Thank you.

Sincerely,



Mary Castillo  
V. P. / Treasurer