

# 2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000129039

FILED  
Jan 06, 2012  
Secretary of State

**Entity Name:** TAMPERPROOF ID COMPANY INC.

**Current Principal Place of Business:**

6043 NW 167TH STREET A-3  
MIAMI, FL 33015

**New Principal Place of Business:**

**Current Mailing Address:**

6043 NW 167TH STREET A-3  
MIAMI, FL 33015

**New Mailing Address:**

**FEI Number:** 20-1605584

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

MANN, ARTHUR R  
6043 NW 167TH STREET A-3  
MIAMI, FL 33015 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

**OFFICERS AND DIRECTORS:**

Title: D  
Name: MANN, ARTHUR R  
Address: 277 PROVIDENCE OAKS CIRCLE  
City-St-Zip: ALPHARETTA, GA 30009

Title: D  
Name: MAYNARD, MARK W  
Address: 5966 PARADISE POINT DRIVE  
City-St-Zip: MIAMI, FL 33157

Title: D  
Name: FOX, IRA A  
Address: 13321 SW 104TH AVENUE  
City-St-Zip: MIAMI, FL 33176

Title: D  
Name: FOX, BRIAN  
Address: 4414 E WHITEWATER AVE  
City-St-Zip: WESTON, FL 33332

Title: D  
Name: SCHMITT, ALEX  
Address: 14573 SW 155 PLACE  
City-St-Zip: MIAMI, FL 33196

Title: D  
Name: DUNN, PAUL  
Address: 11209 SW 112 ST  
City-St-Zip: MIAMI, FL 33176

I hereby 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 all other like empowered.

SIGNATURE: BRIAN FOX

D

01/06/2012

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

\_\_\_\_\_  
Date