## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## FILED May 16, 2007 8:00 am Secretary of State

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DOCUMENT # P04000129293  1. Entity Name ALLSTATE SECURITY SOLUTIONS, INC.						05-16-2007	' 90014 01'	7 ***150.	00	
Principal Place	e of Business	Mailing Address			- 4 4	ADDA				
501 W MAIN		P O BOX 449 Lake Hamilton, FL 338	351 US		4011		<b>                                    </b>	<b>i i i i i i i i i i i i i i i i i i i </b>	<b>186</b> 1 A 2011	
2. Principal P	lace of Business - No P.O. Box#	3. Mailing Address								
903 W Main St.		903 W Main St			i ibnerbei fr	måni 61811 6811 19111 1	inini mara itata inf	IN ITEM INTERNIT	iaei II (EE)	
Suite, Apt.		Suite, Apt. #, etc.			05082007	Chg-P	CR2E03	34 (12/06)		
City & State		City & State			4. FEI Numbe			Ар	plied For	
	nilton, Fl	Lake Hamilton,			20-163	0910			t Applicable	
~Zip~~~		Zip-	Country -	ľ	5. Certificate	of Status Desired		8.75 Add		
33851	Polk Polk	33851	<u>US</u>	<u>_</u>	7 Name and	Address of New		ee Required		
	6. Name and Address of Current	Registered Agent	Name		7. Name and	Address of New	Kedisteled Y	Seur.	<del></del>	
GERACCI,	FSTHER		Gerad		Dino					
501 W MA			Street A	Street Address (P.O. Box Number is Not Acceptable) 903 W Main St						
	MILTON, FL 33851		903 1	w Mali	1 St				<del></del>	
			City	Hami]	<del></del>		FL	Zip Code	•	
			Lake	Ham1	iton	the in the Oten of		・レンワフェ		
	perned entity submits this statement for	r the purpose of changing its re	egistered office or	registered	d agent, or bo	in, in the State of	Horida. I am t	amiliar with,	and accept	
the obligati		محمدف								
SIGNATURE_	1000 D.	4.00	Registered Agent signatu		A		DATE			
	Signature, typed or printed name of registered agent	and the rappicable. (NOIE: F	redustesed wheat sidually	nte tednited w	men remsusung)		UAIE			
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	LE NOW!!! FEE IS \$150.00 ue by September 14, 2007	Election Campaign     Trust Fund Contrib		\$5.0 Added	00 May Be d to Fees	In accordance	e with s. 607. id not receive	193(2)(b), the prior r	F.S., the notice.	
Di	ue by September 14, 2007	Trust Fund Contrib	oution.	\$5.0 Added	d to Fees	corporation d	id not receive	the prior r	notice.	
10.		Trust Fund Contrib		\$5.0 Addec	d to Fees ADDITIONS	In accordance corporation d	id not receive	the prior r	otice.	
Di	ue by September 14, 2007 OFFICERS AND	Trust Fund Contrib	11.	Addex	ADDITIONS	corporation d	id not receive	the prior r	notice.	
10. TITLE	ue by September 14, 2007  OFFICERS AND PST	Trust Fund Contrib	11.	VP-S BICE	ADDITIONS	CHANGES TO O	id not receive	the prior r	otice.	
10. TITLE NAME	OFFICERS AND PST GERACCI, DINO	Trust Fund Contrib	11. TITLE NAME	VP-S BICE 501	ADDITIONS, EC. TAMMY W MAIN	COMPORATION OF CHANGES TO O	FFICERS AND	the prior r	otice.	
10. TITLE NAME STREET ADDRESS	OFFICERS AND PST GERACCI, DINO 501 W MAIN ST	Trust Fund Contrib	11. THUE NAME STREET ADDRESS	VP-S BICE 501	ADDITIONS, EC. TAMMY W MAIN	CHANGES TO O	FFICERS AND	the prior r	otice.	
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12. I nereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that he information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal affect as if made under oath; that I am 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:

BIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

Date Daytime Phone #