2006 FOR PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # P04000132503

1. Entity Name
ALARM SYSTEMS USA INC.

Principal Place of Business

11460 S W 35 LANE MIAMI, FL 33165

Mailing Address

11460 S W 35 LANE MIAMI, FL 33165

FILED May 08, 2006 08:00 AM Secretary of State

CR2E034 (11/05)

Fee Required



DO NOT WRITE IN THIS SPACE

<u></u>		
4. FEI Number	 Applied For	
20-1658734	Not Applicable	
5. Certificate of Status Desired	\$8.75 Additional	

6. Name and Address of Current Registered Agent

BURGOS, ROBERTO 11460 S W 35 LANE MIAMI, FL 33165

DO NOT WRITE IN THIS SPACE

No Chg-P

04212006

<u> </u>						
8. The above named entry 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 predistance gent. SIGNATURE Strature typed or printed name of registered agent and tried applicable. (NOTE: Registered Agent signature required when renestating) OATE						
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
10.	OFFICERS AND DIREC	TORS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPS BURGOS, ROBERTO 11460 S W 35 LANE MIAMI, FL 33165			•	Hannaaceanaa	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HERNANDEZ, LUTGAZDA 11460 SW 35 LN MIAMI, FL 33165			. ,	05/19/06-80077-019 150.00	
TITLE NAME STREET ADDRESS CITY-ST-ZIP				DO	NOT WRITE	
NAME STREET ADDRESS CITY-ST-ZIP			į	IN T	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. Thereby 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						