

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000154248

FILED
Aug 06, 2008
Secretary of State

Entity Name: WIRELESS SECURITY INTEGRATORS, INC.

Current Principal Place of Business:

8930 STATE ROAD 84
UNIT 105
DAVIE, FL 33324 US

New Principal Place of Business:

4711 S.W. 83 RD TERRACE
BAY #8
DAVIE, FL 33324 US

Current Mailing Address:

8930 STATE ROAD 84
UNIT 105
DAVIE, FL 33324 US

New Mailing Address:

FEI Number: 65-1097346 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORNELIUS, BRIAN S
8930 STATE ROAD 84
UNIT 105
DAVIE, FL 33324 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: CORNELIUS, BRIAN S
Address: 9590 ALCAZAR LANE
City-St-Zip: DAVIE, FL 33324 US

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: V.P. () Change (X) Addition
Name: CORNELIUS, NANCY A
Address: 8930 STATE ROAD 84 UNIT #105
City-St-Zip: DAVIE, FL 33324

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: BRIAN CORNELIUS

PRES

08/06/2008

Electronic Signature of Signing Officer or Director

Date