

2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 26, 2007 8:00 am
Secretary of State

02-26-2007 90077 038 ***150.00



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1. Entity Name
 DIGITAL SECURITY SOLUTIONS CORP.

Principal Place of Business
 16318 SW 100TH TERRACE
 MIAMI FL 33196

Mailing Address
 16318 SW 100TH TERRACE
 MIAMI FL 33196



2. Principal Place of Business - No P.O. Box #
 7001 N. Waterway Dr.

3. Mailing Address
 16275 SW 88th # 143

Suite, Apt. #, etc.
 109

Suite, Apt. #, etc.

1st MOORE CR2E034 (10/06)

City & State
 Miami, FL.

City & State
 Miami, FL.

4. FEI Number 20-2258859

Applied For
 Not Applicable

Zip
 33155

Country
 U.S.A.

Zip
 33196

Country
 U.S.A.

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

MOURIZ, MARIO
 16318 SW 100TH TERRACE
 MIAMI FL 33196

7. Name and Address of New Registered Agent

Name **Mario Mouriz**
 Street Address (P.O. Box Number is Not Acceptable)
7001 N. Waterway Dr. - Suite 109
 City **Miami** FL Zip Code **33155**

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 *Mario Mouriz*

14 Feb 2007

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW!! FEE IS \$150.00
After May 1, 2007 Fee Will Be \$550.00
Make Check Payable to Florida Department of State

9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Added to Fees

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PSD	MOURIZ, MARIO A	16318 SW 100TH TERRACE	MIAMI FL 33196	<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>
				<input type="checkbox"/>

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change	<input type="checkbox"/> Addition
PSD	MOURIZ, MARIO	7001 N. Waterway Dr. Suite 109	Miami, FL. 33155	<input checked="" type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Mario Mouriz*

14 Feb 2007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #