

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000021172

FILED
Apr 09, 2006
Secretary of State

Entity Name: ACCESS VIDEO SECURITY SPECIALIST, INC.

Current Principal Place of Business:

3083 FLORIDA MANGO ROAD
APT 4
LAKE WORTH, FL 33461 US

New Principal Place of Business:

462 SW NAFTAL PLACE
PORT ST LUCIE, FL 34953 US

Current Mailing Address:

3083 FLORIDA MANGO ROAD
APT 4
LAKE WORTH, FL 33461 US

New Mailing Address:

462 SW NAFTAL PLACE
PORT ST LUCIE, FL 34953 US

FEI Number: 61-1483484

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: D () Delete
Name: KNOWLES, PATRICK L
Address: 3083 FLORIDA MANGO ROAD, APT 4
City-St-Zip: LAKE WORTH, FL 33461 US

Title: D () Delete
Name: ALCIME-KNOWLES, MARY
Address: 3083 FLORIDA MANGO ROAD, APT 4
City-St-Zip: LAKE WORTH, FL 33461 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: KNOWLES, PATRICK L
Address: 462 SW NAFTAL PLACE
City-St-Zip: PORT ST LUCIE, FL 34953 US

Title: D (X) Change () Addition
Name: ALCIME-KNOWLES, MARY
Address: 462 SW NAFTAL PLACE
City-St-Zip: PORT ST LUCIE, FL 34953 US

I hereby certify that the information supplied with this filing does not qualify for the 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: PATRICK L KNOWLES

P

04/09/2006

Electronic Signature of Signing Officer or Director

Date