## P05000056262

(Re	equestor's Name)	
(Ad	dress)	
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i (Cit	ty/State/Zip/Phone	e #)
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Certified Coples	Certificates	of Status
Special Instructions to	Filing Officer:	
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		ARTHUR DE LA CAMPAGNA

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SECRETARY OF STATE
SECRETARY SEE, FLORIDA

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## **COVER LETTER**

TO:	Amendment Section Division of Corporations	
SUBJ	JECT: e-Security Systems, Inc (Name of Corporation)	
DOCU	CUMENT NUMBER: P05000056262	
	enclosed Statement of Change of Registered Office/Agent and	fee are submitted for filing.
	se return all correspondence concerning this matter to the follow	
	Pedro M Semaan (Name of Contact Person)	-
•	(Name of Contact Person)	
	e-Security Systems, Inc (Firm/Company)	
	7750 W 26th Ave Suite 8 (Address)	
	Hialeah FL 33016 (City/State and Zip Code)	<del></del>
For fu	further information concerning this matter, please call:	
Pedr	ro M Semaan at (305 (Name of Contact Person) (Area	) 677-0017 Code & Daytime Telephone Number)
Enclos	osed is a \$35.00 check made payable to the Department of Stat	е.
	Division of Corporations D P.O. Box 6327 C Tallahassee, FL 32314 26	reet Address: mendment Section ivision of Corporations lifton Building 661 Executive Center Circle allahassee, FL 32301

## $\boldsymbol{\cdot}\boldsymbol{\cdot}$ STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

	Pursuant to the provisions of sections 607.0502, 617.0502, 607.1508, or 617.1508, Florida Statutes, this statement of change is submitted for a corporation organized under the laws of the State of Florida in order to change its registered office or registered agent, or both, in the State of Florida.	
	1. The name of the corporation: e-Security Systems, Inc	
	2. The principal office address: 7750 W 26th Ave Suite 8	
	Hialeah FL 33016	
	3. The mailing address (if different):	
	4. Date of incorporation/qualification: 04/15/2005 Document number: P05000056262	
	5. The name and street address of the current registered agent and registered office on file with the Florida Department of State:	
	Michele Ivonne Semaan	
	7750 W 26th Ave Suite 8	
	Hialeah FL 33016	
	6. The name and street address of the new registered agent (if changed) and /or registered office (if changed):  Pedro M Semaan	
	7750 W 26th Ave Suite 8	
	(P.O. Box NOT acceptable) Hialeah FL 33016	
	The street address of its registered office and the street address of the business office of its registered agent, as changed will be identical.	
<	Such change was authorized by resolution duly adopted by its board of directors or by an officer so authorized by the board, or the corporation has been notified in writing of the change.	
	Pedro M. Sman (PD) (Printed or typed name and title)	
(	I hereby accept the appointment as registered agent and agree to act in this capacity.  I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent. Or, if this document is being filed merely to reflect a change in the registered office address, I hereby confirm that the corporation has been notified in writing of this change.	
	7/14/06	
	(Signature of Registered Agent) (Date)	
	If signing on behalf of an entity:	
	(Typed or Printed Name)	
	* * * FILING FEE: \$35.00 * * *	

MAKE CHECKS PAYABLE TO FLORIDA DEPARTMENT OF STATE MAIL TO: DIVISION OF CORPORATIONS, P.O. BOX 6327, TALLAHASSEE, FL 32314 CR2E045 (8/05)