

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000100010

**FILED**  
**Mar 29, 2007**  
**Secretary of State**

**Entity Name:** S.W.A.T. SECURITY DEFENSE CORP.

**Current Principal Place of Business:**

499 N. STATE RD. 434 SUITE 2041  
ALTAMONTE SPRINGS, FL 32714

**New Principal Place of Business:**

499 N. STATE RD. 434  
SUITE 2041  
ALTAMONTE SPRINGS, FL 32714

**Current Mailing Address:**

1879 ROCKHURST AVE.  
ORLANDO, FL 32826

**New Mailing Address:**

499 N. STATE RD. 434  
SUITE 2041  
ALTAMONTE SPRINGS, FL 32714

**FEI Number:** 06-1750148

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

RODRIGUEZ, ANTONIO JR  
5403 RED BONE LN.  
ORLANDO, FL 32810 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:** RODRIGUEZ, ANGEL L  
**Address:** 1879 ROCKHURST AVE.  
**City-St-Zip:** ORLANDO, FL 32826

**Title:** TR ( ) Delete  
**Name:** RODRIGUEZ, ANTONIO JR  
**Address:** 5403 RED BONE LN  
**City-St-Zip:** ORLANDO, FL 32810

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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:** ANTONIO RODRIGUEZ JR.

TR

03/29/2007

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date