FILED Jan 17, 2006 8:00 am Secretary of State 01-17-2006 90235 025 ***150.00

2006 FOR PROFIT CORPORATION

	AIIIO	AL REPORT			-		
DOCUMENT # P05000109996 1. Entity Name AMERICA L & G SECURITY SYSTEM, INC.					60002076		
Principal Plac	e of Business	Mailing Address					
11770 SW 1	72 ST	11770 SW 172 ST	-				
MIAMI, FL 3		MIAMI, FL 33177			,		
						1	
2. Principal Place of Business		3. Mailing Address					
Suite, Apt. #, etc.		Suite, Apt. #, etc.			01132006 Chg-P CR2E034 (11/05)		
City & State		City & State		, <u>, , , , , , , , , , , , , , , , , , </u>	4. FEI Number Applied Fo Applied Fo Applied Fo Not Applied Fo		
Zip	Country Zip Cou		Countr	у	5. Certificate of Status Desired Status Desired Fee Required		
	6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent			
				Name			
MUSTELIER, LUIS 11770 SW 172 ST			-	Street Address (P.O. Box Number is Not Acceptable)			
MIAMI, FL 33177					The Association of the Control of th		
				City	FL Zip Code		
8. The above the obligat	named entity submits this statem tions of registered agent.	ent for the purpose of changing its	s registere	d office or registe	red agent, or both, in the State of Florida. I am familiar with, and acc	cept	
SIGNATURE	Signature typed or printed/hame of registered	d agent and title if applicable. (NOT	TE: Registered	Agent signature required	d when remstating) DATE	-	
After M	E NOWI!! FEE IS \$150.00 ay 1, 2006 Fee will be \$	550.00 Trust Fund Con	tribution.		6.00 May Be ded to Fees		
10.		AND DIRECTORS	11.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
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NAME STREET ADDRESS	MUSTELIER, LUIS 11770 SW 172 ST						
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TITLE NAME	RODRIGUEZ, XOCHYL III			ľ	Change 🗀 Ac	ווסוזוטו	
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STREET ADDRESS			STREE	T ADDRESS			
CITY-ST-ZIP			CITY-	ST-ZIP			
12. I hereby indicated of the co-	certify that the information supplied on this report or supplemental reporation or the receiver or trustee , or on an attachment with an add	ed with this filing does not qualify foot is true and accurate and that employeed to execute this reportes, with all others like empowered	for the exer my signatu rt as required.	mptions containe ure shall have the ed by Chapter 60	d in Chapter 119, Florida Statutes. I further certify that the informati same legal effect as if made under oath; that I am an officer or direc 7, Florida Statutes; and that my name appears in Block 10 or Block	ion ctor 11 if	
İ	_\	that I					
	ΓURE:₩	י אי יעי		OR	1-13-06 3w.971, W	//	