

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000047712

Entity Name: BUX SECURITY SERVICES U.S.A. INC

FILED
Jun 24, 2009
Secretary of State

Current Principal Place of Business:

800 W OAKLAND PRK BLVD
SUITE 204
FORT LAUDERDALE, FL 33311

New Principal Place of Business:

Current Mailing Address:

800 W OAKLAND PRK BLVD
SUITE 204
FORT LAUDERDALE, FL 33311

New Mailing Address:

FEI Number: 20-4862052

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

BUX, SHARFARAAZ M
520 NE 20THH STREET STE 613
WILTEH MANNEIR, FL 33305 US

Name and Address of New Registered Agent:

BUX, SHARFARAAZ M
659.W.OAKLAND PARK BLVD
C-217
OAKLAND PARK, FL 33311 US

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:

06/24/2009

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BUX, SHARFARAAZ M
Address: 520 NE 20THH STREET STE 613
City-St-Zip: WILTEH MANNEIR, FL 33305

Title: D () Delete
Name: BUX, MOHAMED K
Address: 8220 SUNRISE LAKES BLUD
City-St-Zip: SUNRISE, FL 33322

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: BUX, SHARFARAAZ M
Address: 659.W.OAKLAND PARK BLVD
City-St-Zip: OAKLAND PARK, FL 33311

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

I hereby certify that the information supplied with this filing does not qualify 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: SHARFARAAZ.M.BUX

PRES

06/24/2009

Electronic Signature of Signing Officer or Director

Date