

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117758

FILED
Jul 09, 2008
Secretary of State

Entity Name: FLORIDA SECURITY TECHNOLOGIES, INC.

Current Principal Place of Business:

3664 LOQUAT AVE.
COCONUT GROVE, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3664 LOQUAT AVE.
COCONUT GROVE, FL 33133 US

New Mailing Address:

P.O. BOX 331177
MIAMI, FL 33132 US

FEI Number: 20-5596482 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LOUISE R. CARO, ESQ.
3683 AVOCADO AVE
MIAMI, FL 33133 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

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: TROXLER, SIMON
Address: 1301 W. COPANS RD. BLG G1
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: D () Delete
Name: JORDI, CHARLES B
Address: 1301 W. COPANS RD. BLG G1
City-St-Zip: POMPANO BEACH, FL 33064 US

Title: PD () Delete
Name: FERREIRA, ROBERT L
Address: 3664 LOQUAT AVENUE
City-St-Zip: MIAMI, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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 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: ROBERT FERREIRA

PD

07/09/2008

Electronic Signature of Signing Officer or Director

_____ Date