2008 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Feb 01, 2008 08:00 AN **DOCUMENT # P06000127805 Secretary of State** 1. Entity Name EBS SECURITY INC. Principal Place of Business Mailing Address P.O. BOX 9733 8110-3 LEM TURNER ROAD JACKSONVILLE, FL 32208 JACKSONVILLE, FL 32208 01292008 CR2E034 (11/05) No Cho-P DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 20-5701283 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent BANKHEAD, PRINTELLA DO NOT WRITE 8110-3 LEM TURNER ROAD JACKSONVILLE, FL 32208 IN THIS SPACE 8. 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. I am familiar with, and accept the obligations of registered agent. 01-29-2008 (NOTE: Registered Ag 9. Election Campaign Financing \$5.00 May Be FILE NOW!!! FEE IS \$150.00 After May 1, 2008 Fee will be \$550.00 Trust Fund Contribution. Added to Fees 10. OFFICERS AND DIRECTORS TITLE BANKHEAD, PRINTELLA NAME + STREET ADDRESS 8110-3 LEM TURNER ROAD CITY-ST-ZIP JACKSONVILLE, FL 32208 000000810129 02/08/08-80051-024 150.00 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if