

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000140967

FILED
May 22, 2010
Secretary of State

Entity Name: TECHLINK SECURITY SYSTEMS, INC.

Current Principal Place of Business:

4065 N HAVERHILL RD STE B3-311
W PALM BCH, FL 33417

New Principal Place of Business:

Current Mailing Address:

4065 N HAVERHILL RD STE B3-311
W PALM BCH, FL 33417

New Mailing Address:

FEI Number: 20-5872662

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LACOMBE, KATHLEEN
4065 N HAVERHILL RD STE B3-311
W PALM BCH, FL 33417 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: DP
Name: LACOMBE, KATHLEEN
Address: 4065 N HAVERHILL RD STE B3-311
City-St-Zip: W PALM BCH, FL 33417

Title: DV
Name: VALENTINO, FRANK
Address: 4065 N HAVERHILL RD STE B3-311
City-St-Zip: W PALM BCH, FL 33417

Title: DT
Name: LACOMBE, TIM
Address: 4065 N HAVERHILL RD STE B3-311
City-St-Zip: W PALM BCH, FL 33417

I hereby 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 all other like empowered.

SIGNATURE: KATHLEEN LACOMBE

DP

05/22/2010

Electronic Signature of Signing Officer or Director

_____ Date