

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000080923

FILED
Mar 24, 2009
Secretary of State

Entity Name: TECHNICAL SURVEILLANCE SYSTEMS, INC.

Current Principal Place of Business:

9750 WEST SAMPLE ROAD
SUITE A
CORAL SPRINGS, FL 33065 US

New Principal Place of Business:

10141 NW 53 STREET
SUNRISE, FL 33351 US

Current Mailing Address:

P.O. BOX 9323
CORAL SPRINGS, FL 33075 US

New Mailing Address:

FEI Number: FEI Number Applied For () FEI Number Not Applicable (X) Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

TECHNICAL SURVEILLANCE SCIENCES, INC.
9750 WEST SAMPLE ROAD
STE A
CORAL SPRINGS, FL 33065 US

Name and Address of New Registered Agent:

TECHNICAL SURVEILLANCE SCIENCES, INC.
10141 NW 53 STREET
SUNRISE, FL 33351 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:

03/24/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: BARRETT, DAVID D
Address: 3960 NW 106 AVENUE
City-St-Zip: CORAL SPRINGS, FL 33065 US

Title: P () Delete
Name: GENTILE, DEANNE L
Address: 2940 SW 22 AVENUE, #718
City-St-Zip: DELRAY BEACH, FL 33445 US

Title: VP () Delete
Name: WIGGINS, LAURIE J
Address: 2213 E. HOGAN HOLLOW
City-St-Zip: MARGATE, FL 33063 US

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: DAVID D. BARRETT

D

03/24/2009

Electronic Signature of Signing Officer or Director

Date