

2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P09000018462

FILED
May 05, 2010
Secretary of State

Entity Name: DATA VAULT SECURITY INC.

Current Principal Place of Business:

1101 CHANNELSIDE DR
TAMPA, FL 336023611 US

New Principal Place of Business:

1101 CHANNELSIDE DR
STE 244
TAMPA, FL 336023611 US

Current Mailing Address:

1101 CHANNELSIDE DR
TAMPA, FL 336023611 US

New Mailing Address:

1101 CHANNELSIDE DR
STE 244
TAMPA, FL 336023611 US

FEI Number: 98-0613989

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

CORPORATION SERVICE COMPANY
1201 HAYS STREET
TALLAHASSEE, FL 32301 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: MR
Name: HANSEN, ANDY
Address: 1101 CHANNELSIDE DR, STE 244
City-St-Zip: TAMPA, FL 336023611 US

Title: MR
Name: WATTS, PHILIP
Address: 1101 CHANNELSIDE DR, STE 244
City-St-Zip: TAMPA, FL 336023611 US

Title: MRS
Name: HANSEN, WENDY
Address: 1101 CHANNELSIDE DR, STE 244
City-St-Zip: TAMPA, FL 336023611 US

Title: MRS
Name: WATTS, SALLY
Address: 1101 CHANNELSIDE DR, STE 244
City-St-Zip: TAMPA, FL 336023611 US

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: WENDY HANSEN

MRS

05/05/2010

Electronic Signature of Signing Officer or Director

Date