

**2012 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P09000084540

**FILED**  
**Jan 26, 2012**  
**Secretary of State**

**Entity Name:** SMART CHOICE PROTECTION SYSTEMS, INC.

**Current Principal Place of Business:**

4715 HURON BAY CIRCLE  
KISSIMMEE, FL 34759 US

**New Principal Place of Business:**

**Current Mailing Address:**

4715 HURON BAY CIRCLE  
KISSIMMEE, FL 34759 US

**New Mailing Address:**

FEI Number: 27-1106496

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

VARGAS, KENIA E  
4715 HURON BAY CIRCLE  
KISSIMMEE, FL 34759 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: VARGAS, KENIA E  
Address: 4715 HURON BAY CIRCLE  
City-St-Zip: KISSIMMEE, FL 34759 US

Title: VP  
Name: VARGAS, OLIVER  
Address: 4715 HURON BAY CIRCLE  
City-St-Zip: KISSIMMEE, FL 34759 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: KENIA E. VARGAS

P

01/26/2012

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date