

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000087005

**FILED**  
**Mar 05, 2012**  
**Secretary of State**

**Entity Name:** ACCESS CONTROL SYSTEMS OF SOUTH FLORIDA, CORP.

**Current Principal Place of Business:**

12911 S.W. 147TH TERRACE ROAD  
MIAMI, FL 33186

**New Principal Place of Business:**

**Current Mailing Address:**

12911 S.W. 147TH TERRACE ROAD  
MIAMI, FL 33186

**New Mailing Address:**

**FEI Number:** 27-3767909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

GRASSO, RALPH  
12911 S.W. 147TH TERRACE ROAD  
MIAMI, FL 33186 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: DPS  
Name: GRASSO, RALPH  
Address: 12911 S.W. 147TH TERRACE ROAD  
City-St-Zip: MIAMI, FL 33186

Title: DVT  
Name: PALACIOS, ROGER  
Address: 496 N.W. 165TH STREET ROAD  
City-St-Zip: MIAMI, FL 33169

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: RALPH GRASSO

DPS

03/05/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date