

2012 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P11000093202

FILED
Mar 30, 2012
Secretary of State

Entity Name: A1 SECURITY AND SURVEILLANCE CORP

Current Principal Place of Business:

19370 COLLINS AVE
1409
SUNNY ISLES, FL 33160

New Principal Place of Business:

Current Mailing Address:

19370 COLLINS AVE
1409
SUNNY ISLES, FL 33160

New Mailing Address:

FEI Number: 45-3661705 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

LOPEZ, HARLYN A SR
19370 COLLINS AVE
1409
SUNNY ISLES, FL 33160 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: LOPEZ, HARLYN A
Address: 19370 COLLINS AVE, 1409
City-St-Zip: SUNNY ISLES, FL 33160

Title: P
Name: LOPEZ, HARLYN A
Address: 19370 COLLINS AVE, 1409
City-St-Zip: SUNNY ISLES, FL 33160

Title: P
Name: LOPEZ, HARLYN A
Address: 19370 COLLINS AVE, 1409
City-St-Zip: SUNNY ISLES, FL 33160

Title: P
Name: LOPEZ, HARLYN A
Address: 19370 COLLINS AVE, 1409
City-St-Zip: SUNNY ISLES, FL 33160

Title: P
Name: LOPEZ, HARLYN A
Address: 19370 COLLINS AVE, 1409
City-St-Zip: SUNNY ISLES, FL 33160

Title: P
Name: LOPEZ, HARLYN A
Address: 19370 COLLINS AVE, 1409
City-St-Zip: SUNNY ISLES, FL 33160

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: HARLYN A. LOPEZ

P

03/30/2012

Electronic Signature of Signing Officer or Director

Date