2006 FOR PROFIT CORPORATION REINSTATEMENT

DOCUMENT# P95000053175

LINDSAY, LENA

TAMPA, FL 33634

5688 CRENSHAW ST.

Name:

Address: City-St-Zip:

Entity Name: BE SAFE SECURITY SYSTEM, INC.

FILED Oct 27, 2006 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 5688 W. CRENSHAW STREET #200 TAMPA, FL 33635 **New Mailing Address: Current Mailing Address:** 5688 W. CRENSHAW STREET 5929 CAPE LOOP #200 LAND O LAKES, FL 34639 TAMPA, FL 33635 FEI Number: 59-3321203 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CHONG, DAVID 5688 W. CRENSHAW ST. #200 TAMPA, FL 33634 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: DAVID CHONG 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: () Delete () Change () Addition CHONG, DAVID Name: Name: 5688 CRENSHAW ST. #200 Address: Address: City-St-Zip: TAMPA, FL 33634 City-St-Zip: Title: Title: () Change () Addition () Delete Name: CRUZ, TANYA Name: 5688 W. CRENSHAW ST. Address: Address: TAMPA, FL 33634 City-St-Zip: City-St-Zip: Title: Title: () Delete () Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the 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.

Name:

Address:

City-St-Zip:

	SIGNATURE:	DAVID CHONG	VP	10/27/2006
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