2002 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# P95000061257

Entity Name: CONTROL COMMUNICATIONS INC.

FILED Apr 29, 2002 8:00 AM Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	IENDA BLVD		4720 OAKES ROAD		
STE A DAVIE, FL	33314 US		STE E DAVIE, FL 33314 U	JS	
Current Mailing Address:			,	New Mailing Address:	
Ourient Maning Address.			New Maning Address	New Maining Address.	
3650 HACIEND BLVD.			PO BOX 291740	PO BOX 291740 DAVIE, FL 333291740 US	
SUITE A DAVIE, FL	. 33314 US		DAVIE, FL 333291740	0.03	
FEI Number	: 65-0602414	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:	
10101 SW	JEZ, SIGILFREI / 53 COURT CITY, FL 3332				
	e named entity s e of Florida.	ubmits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATUI	RE:				
	Electron	ic Signature of Registered Ag	jent	Date	
			quirement and elects to do so (X).		
Election Campaign Financing Trust Fund Contribution (). OFFICERS AND DIRECTORS:			ADDITIONS/CHANGI	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title:		Delete	Title:	() Change () Addition	
Name:	RODRIGUEZ, S		Name:	() Change () Addition	
Address:	10101 SW 53 C		Address:		
City-St-Zip:	COOPER CITY,	FL 33328	City-St-Zip:		
Title:	VP ()	Delete	Title:	() Change () Addition	
Name:		IGILFREDO SR.	Name:		
Address:	5307 SW 120 A		Address:		
City-St-Zip:	COOPER CITY,	FL 33330	City-St-Zip:		
Title:		Delete	Title:	() Change () Addition	
Name:	RODRIGUEZ, JU		Name:		
Address:	10101 SW 53 C		Address:		
City-St-Zip:	COOPER CITY,	FL 33328	City-St-Zip:		
Title:	, ,	Delete	Title:	() Change () Addition	
Name:	MARSHALL, LIN		Name:		
Address:	2646 MILLER C		Address:		
City-St-Zip:	WESTON, FL 3	3332	City-St-Zip:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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.

SIGNATURE: SIGILFREDO RODRIGUEZ, JR DP 04/29/2002