## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P97000012607

Entity Name: ELITE SECURITY ALARM SYSTEMS, INC.

FILED Apr 09, 2008 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

9 PALM PLAZA

HOMESTEAD, FL 33030

Current Mailing Address: New Mailing Address:

16900 SW 298 STREET 28951 SW 164 AVENUE HOMESTEAD, FL 33030 HOMESTEAD, FL 33033

FEI Number: 65-0731267 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

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

MAURA, MICHELLE
16900 SW 298 STREET
HOMESTEAD, FL 33030 US

MAURA, MICHELLE
28951 SW 164 AVENUE
HOMESTEAD, FL 33033 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: MICHELLE MAURA 04/09/2008

Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MAURA, JOE
 Name:
 MAURA, JOE

 Address:
 16900 SW 298 STREET
 Address:
 28951 SW 164 AVENUE

 Address:
 16900 SW 298 STREET
 Address:
 28951 SW 164 AVENUE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33033

Title: VSTD ( ) Delete Title: VSTD (X) Change ( ) Addition

 Name:
 MAURA, MICHELLE
 Name:
 MAURA, MICHELLE

 Address:
 16900 SW 298 STREET
 Address:
 28951 SW 164 AVENUE

 City-St-Zip:
 HOMESTEAD, FL 33030
 City-St-Zip:
 HOMESTEAD, FL 33033

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

SIGNATURE: MICHELLE MAURA VP 04/09/2008