2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P97000105865

Address:

City-St-Zip:

1511 EAST FOWLER AVE., SUITE N

TAMPA, FL 33612

Entity Name: SOLAR SECURITY FILMS, INC

FILED Jun 17, 2009 Secretary of State

Entity Nar	Me: SULAR S	ECURITY FILMS, INC.			
Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
1511 E. FO SUITE N TAMPA, FI	OWLER AVE. L 33612				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
1511 E. FO SUITE N TAMPA, FI	OWLER AVE. L 33612				
FEI Number:	59-3398689	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
MILLER, CAROLYN CPA 6003 WEST GLORY HILL STREET BEVERLY HILLS, FL 34465 US			1511 EAST FOWLE	LAMBETH, JAMES CPA 1511 EAST FOWLER AVE E	
			_	TAMPA, FL 33612 US	
	named entity s e of Florida.	ubmits this statement for the pu	rpose of changing its registe	red office or registered agent, or both,	
SIGNATURE: JAMES LAMBETH, CPA				06/17/2009	
	Electron	c Signature of Registered Ager	nt	Date	
		(2)(b), F.S., the corporation did not Trust Fund Contribution ().	receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () CENTENO, JOH 5813 BAYSHOR TAMPA, FL 336	E BLVD.	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	VP () CENTENO, JOH 5813 BAYSHOR TAMPA, FL 336	E BLVD	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	SCTY ()	Delete IAM SECRTRY	Title: Name:	() Change () Addition	

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.

Address:

City-St-Zip:

SIGNATURE: JOHN J CENTENO PRES 06/17/2009