

# 2006 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 22, 2006 8:00 am**  
**Secretary of State**

05-22-2006 90068 001 \*\*\*150.00

**DOCUMENT # P98000008491**

1. Entity Name  
**INNOVATIVE SECURITY SOLUTIONS, INC.**



Principal Place of Business  
**3600 INVESTMENT LANE, #103  
WEST PALM BEACH, FL 33404**

Mailing Address  
**3600 INVESTMENT LANE, #103  
WEST PALM BEACH, FL 33404**

**00010306**



2. Principal Place of Business

3. Mailing Address

04062006 Chg-P CR2E034 (11/05)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**59-3504483**

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FL 32301**

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00  
After May 1, 2006 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE SRVD ☒ Delete  
NAME PALMER, TIMOTHY  
STREET ADDRESS 3600 INVESTMENT LANE, #103  
CITY-ST-ZIP WEST PALM BEACH, FL 33404

TITLE P ☐ Delete  
NAME FAIRBANKS, JAMES  
STREET ADDRESS 3600 INVESTMENT LANE, #103  
CITY-ST-ZIP WEST PALM BEACH, FL 33404

TITLE CD ☐ Delete  
NAME BREWER, FRANK J  
STREET ADDRESS 2450 BLVD OF THE GENERALS  
CITY-ST-ZIP NORRISTOWN, PA 19403

TITLE ST ☐ Delete  
NAME PICHOLA, JOHN M  
STREET ADDRESS 2450 BLVD OF THE GENERALS  
CITY-ST-ZIP NORRISTOWN, PA 19403

TITLE D ☒ Delete  
NAME FRIEDRICHSEN, JOHN B  
STREET ADDRESS 1140 BAY ST. STE. 4000  
CITY-ST-ZIP TORONTO, CANADA, m5s 2b4

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Assistant Treasurer ☐ Change ☒ Addition  
NAME Doug Cooke  
STREET ADDRESS 1140 Bay St. Ste 4000  
CITY-ST-ZIP Toronto, Ontario M5S2B4 Canada

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

*CFO John Palmer*

*5/12/06*

*610-620-6720*