

# **2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P98000010626

Entity Name: DELTA ALARM PRODUCTS, INC.

**FILED**  
**Apr 13, 2006**  
**Secretary of State**

## **Current Principal Place of Business:**

7165 S.W. 44 STREET  
MIAMI, FL 33155

## **New Principal Place of Business:**

## **Current Mailing Address:**

7165 S.W. 44 STREET  
MIAMI, FL 33155

## **New Mailing Address:**

FEI Number: 65-0829380

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## **Name and Address of Current Registered Agent:**

QUINTERO, JOSE E  
4022 S.W. 154 COURT  
MIAMI, FL 33196 US

## **Name and Address of New Registered Agent:**

JOSE, TORRES A  
7165 S.W. 44 STREET  
MIAMI, FL 33155 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: JOSE TORRES

04/13/2006

Electronic Signature of Registered Agent

Date

## **OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: QUINTERO, JOSE  
Address: 7165 S.W. 44 STREET  
City-St-Zip: MIAMI, FL 33155

Title: VP ( ) Delete  
Name: TORRES, JOSE  
Address: 7165 S.W. 44 STREET  
City-St-Zip: MIAMI, FL 33155

Title: S ( ) Delete  
Name: QUINTERO, ANGELA  
Address: 7165 S.W. 44 STREET  
City-St-Zip: MIAMI, FL 33155

Title: T (X) Delete  
Name: QUINTERO, MARTA  
Address: 7165 S.W. 44 STREET  
City-St-Zip: MIAMI, FL 33155

## **ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: P (X) Change ( ) Addition  
Name: TORRES, JOSE A  
Address: 7165 S.W. 44 STREET  
City-St-Zip: MIAMI, FL 33155

Title: T (X) Change ( ) Addition  
Name: QUINTERO, MARTA  
Address: 7165 S.W. 44 STREET  
City-St-Zip: MIAMI, FL 33155

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

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.

SIGNATURE: JOSE TORRES

P

04/13/2006

Electronic Signature of Signing Officer or Director

Date