

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000025803

FILED
Apr 28, 2006
Secretary of State

Entity Name: REMOTE RESPONSE CORPORATION

Current Principal Place of Business:

11000 NW 32ND AVENUE
MIAMI, FL 33167

New Principal Place of Business:

Current Mailing Address:

11000 NW 32ND AVENUE
MIAMI, FL 33167

New Mailing Address:

P.O. BOX 133497
HIALEAH, FL 33013 US

FEI Number: 65-0823924

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

SALAMA, SAMUEL M
11000 NW 32 AVE
MIAMI, FL 33167 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: SALAMA, ALBERTO M
Address: 401 HOLIDAY DR.
City-St-Zip: HALLANDALE, FL 33009

Title: T () Delete
Name: SALAMA, SAMUEL M
Address: 19111 COLLINS AVENUE APT. #904
City-St-Zip: AVENTURA, FL 33160

Title: S () Delete
Name: SALAMA, ELIAS M
Address: 3804 SW 53RD COURT
City-St-Zip: HOLLYWOOD, FL 33312

Title: V () Delete
Name: BENSABAT, JOSEPH
Address: 3801 NE 207 ST. #807
City-St-Zip: AVENTURA, FL 33180

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: S (X) Change () Addition
Name: SALAMA, ELIAS M
Address: 2600 ISLAND BOULEVARD #305
City-St-Zip: AVENTURA, FL 33180

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: ALBERTO M. SALAMA T.

P

04/28/2006

Electronic Signature of Signing Officer or Director

Date