2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P98000050586

FILED Jan 08, 2007 Secretary of State

Entity Name: SIGNAL TECHNOLOGY AND INSTALLATION CORPORATION

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

3411 SW 50TH AVE 3701 SW 47TH AVE

DAVIE, FL 33314 SUITE 101

FT. LAUDERDALE, FL 33314

Current Mailing Address: New Mailing Address:

3411 SW 50TH AVE 3701 SW 47TH AVE

DAVIE, FL 33314 SUITE 101

FT. LAUDERDALE, FL 33314

FEI Number: 65-0850057 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:

ABRAMS, HOWELL ABRAMS, HOWELL 3411 SW 50TH AVE 3701 SW 47TH AVE

DAVIE, FL 33314 US SUITE 101 FT. LAUDERDALE, FL 33314 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: 01/08/2007

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: ABRAMS, HOWELL Name: ABRAMS, HOWELL

 Address:
 3411 SW 50TH AVE
 Address:
 3701 SW 47TH AVE #101

 City-St-Zip:
 DAVIE, FL 33314
 City-St-Zip:
 FT. LAUDERDALE, FL 33314

Title: VPSD () Delete Title: VPSD (X) Change () Addition Name: WOOD, KELLY D Name: WOOD, KELLY D

 Name:
 WOOD, RELLY D
 Name:
 WOOD, RELLY D

 Address:
 3411 SW 50TH AVE
 Address:
 3701 SW 47TH AVE #101

 City-St-Zip:
 DAVIE, FL 33314
 City-St-Zip:
 FT. LAUDERDALE, FL 33314

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

 Name:
 NAPOLITANO, CHARLES
 Name:
 NAPOLITANO, CHARLES

 Address:
 3411 SW 50TH AVE
 Address:
 3701 SW 47TH AVE #101

 City-St-Zip:
 DAVIE, FL 33314
 City-St-Zip:
 FT. LAUDERDALE, FL 33314

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: HOWELL ABRAMS PD 01/08/2007