2007 FOR PROFIT CORPORATION REINSTATEMENT

FILED
Oct 17, 2007
Secretary of State

DOCUMENT# P99000000844

Entity Name: ALERT SECURITY PROFESSIONALS, INC.

Current Principal Place of Business:

930 18TH AVE S.W.
VERO BEACH, FL 32962

New Principal Place of Business:

3205 E THOMPSON ROAD
INDIANAPOLIS, IN 46227

Current Mailing Address:

4405 7TH LANE SW
VERO BEACH, FL 32968

New Mailing Address:

3205 E THOMPSON ROAD
INDIANAPOLIS, IN 46227

FEI Number: 65-0886150 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HAGIN, JOHN M
930 18TH AVE SW
VERO BEACH, FL 32962 US

Name and Address of New Registered Agent:

MYERS, DAVID L
3205 E THOMPSON ROAD
INDIANAPOLIS, FL 46227 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: DAVID L. MYERS 10/17/2007
Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: HAGIN, JOHN M
Address: 4405 7TH LANE SW
City-St-Zip: VERO BEACH, FL 32968

Title: STD (X) Delete
Name: HAGIN, LISA R
Address: 4405 7TH LANE SW
City-St-Zip: VERO BEACH, FL 32968

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: MYERS, DAVID L
Address: 3205 E THOMPSON ROAD
City-St-Zip: INDIANAPOLIS, IN 46227

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

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.

SIGNATURE: DAVID L. MYERS PD 10/17/2007
Electronic Signature of Signing Officer or Director Date