2007 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 21, 2007
Secretary of State

DOCUMENT# P99000024533

Entity Name: TOP SECURITY SYSTEMS, INC.

Current Principal Place of Business:

17 S. FT. LAUDERDALE BEACH BLVD.
126
FT. LAUDERDALE, FL 33316

New Principal Place of Business:

Current Mailing Address:

PO BOX 278526
MIRAMAR, FL 33027

New Mailing Address:

FEI Number: 65-0908052 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ZULOAGA, HENRY
11300 S.W. 13 STREET
APT. 102
PEMBROKE PINES, FL 33025 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: D ( ) Delete
Name: ZULOAGA, ANA
Address: 11300 S.W. 13 STREET, APT. 102
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete
Name: ZULOAGA, MARIA
Address: 614 SW, 106 AV
City-St-Zip: PEMBROKE PINES, FL 33025

Title: V ( ) Delete
Name: ZULOAGA, FABIANA
Address: 614 SW, 106 AV
City-St-Zip: PEMBROKE PINES, FL 33025

Title: D ( ) Delete
Name: ZULOAGA, RYNA
Address: 11300 S.W. 13 STREET, APT.102
City-St-Zip: PEMBROKE PINES, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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: ANA ZULOAGA D 01/21/2007

Electronic Signature of Signing Officer or Director — Date