2003 UNIFORM BUSINESS REPORT (UBR)

FILED
Jan 08, 2003
Secretary of State

DOCUMENT# S88463

Entity Name: LEVCON/ALARMPRO, INC.

Current Principal Place of Business:

7302 NW 18 COURT
PEMBROKE, FL 330241006

New Principal Place of Business:

Current Mailing Address:

PO BOX 849197
PEMBROKE PINES, FL 330849197

New Mailing Address:

FEI Number: 65-0292321 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LEVENSON, LEE D.
2560 NE 208TH TERRACE
MIAMI, FL 331801316 US

Name and Address of New Registered Agent:

LEVENSON, LEE D.
7302 NW 18 COURT
PEMBROKE PINES, FL 330241006 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: _____ 01/08/2003
Electronic Signature of Registered Agent — Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: LEVENSON, LEE D.
Address: 7302 NW 18 COURT
City-St-Zip: PEMBROKE PINES, FL 330241006

Title: VD ( ) Delete
Name: CONNORS, HAROLD J.
Address: 2176 NE 63RD COURT
City-St-Zip: FT. LAUDERDALE, FL

Title: SD ( ) Delete
Name: LISCIO, GARY D.
Address: 839 NW 81ST WAY
City-St-Zip: PLANTATION, FL 33324

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: CONNORS, HAROLD J.
Address: 2176 NE 63RD COURT
City-St-Zip: FT. LAUDERDALE, FL 33308

Title: SD (X) Change ( ) Addition
Name: LISCIO, GARY D.
Address: 16963 SW 145 AVE
City-St-Zip: MIAMI, FL 33177

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: LEE D LEVENSON PD 01/08/2003
Electronic Signature of Signing Officer or Director — Date