

# 2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V30581

**FILED**  
**Apr 29, 2011**  
**Secretary of State**

**Entity Name:** SECURITY PROTECTION SYSTEMS, INC.

**Current Principal Place of Business:**

4217 N LAUBER WAY  
TAMPA, FL 33614 US

**New Principal Place of Business:**

4217 N LAUBER WAY  
4217 AIR CARGO RD.  
TAMPA, FL 33614 US

**Current Mailing Address:**

4217 N LAUBER WAY  
TAMPA, FL 33614 US

**New Mailing Address:**

4217 N LAUBER WAY  
4217 AIR CARGO RD  
TAMPA, FL 33614 US

FEI Number: 59-3121441

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

LABONTE, SONYA K  
4217 N. LAUBER WAY  
TAMPA, FL 33614 US

**Name and Address of New Registered Agent:**

FRUSHONE, ROBERT S  
4217 N. LAUBER WAY  
4217 AIR CARGO RD.  
TAMPA, FL 33614 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: ROBERT S FRUSHONE

04/29/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P,S  
Name: FRUSHONE, ROBERT S  
Address: 4217 N. LAUBER WAY  
City-St-Zip: TAMPA, FL 33614 US

I hereby 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 all other like empowered.

SIGNATURE: ROBERT S. FRUSHONE

P,S

04/29/2011

Electronic Signature of Signing Officer or Director

Date