

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# V37353

FILED
Apr 29, 2005
Secretary of State

Entity Name: A.V.S. SECURITY SYSTEMS, INC.

Current Principal Place of Business:

5747 N ANDREWS WY
FT LAUDERDALE, FL 33309 US

New Principal Place of Business:

5775 N ANDREWS WY
FT LAUDERDALE, FL 33309 US

Current Mailing Address:

5747 N ANDREWS WY
FT. LAUDERDALE, FL 33309 US

New Mailing Address:

5775 N ANDREWS WY
FT. LAUDERDALE, FL 33309 US

FEI Number: 65-0357815

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NEWMAN, ROBERT
5747 N ANDREWS WY
FT LAUDERDALE, FL 33309 US

Name and Address of New Registered Agent:

NEWMAN, ROBERT
5775 N ANDREWS WY
FT LAUDERDALE, FL 33309 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:

04/29/2005

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: ROBERT NEWMAN,
Address: 5747 N ANDREWS WY
City-St-Zip: FT LAUDERDALE, FL 33309 US

Title: TD () Delete
Name: JAMES PASQUARELLO,
Address: 5747 N ANDREWS WY
City-St-Zip: FT LAUDERDALE, FL 33309 US

Title: SD () Delete
Name: ROGER NEWMAN,
Address: 1211 MEADOWBROOK ROAD N.E.
City-St-Zip: PALM BAY, FL

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ROBERT NEWMAN,
Address: 5775 N ANDREWS WY
City-St-Zip: FT LAUDERDALE, FL 33309 US

Title: TD (X) Change () Addition
Name: JAMES PASQUARELLO,
Address: 5775 N ANDREWS WY
City-St-Zip: FT LAUDERDALE, FL 33309 US

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 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: RN

P

04/29/2005

Electronic Signature of Signing Officer or Director

Date