## 2008 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# V42172

FILED Feb 20, 2008 Secretary of State

Entity Name: TECHNICAL SURVEILLANCE SPECIALISTS, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	AMPLE ROAD,			
STE. A	PRINGS, FL 33065	5 US		
	•	, 00		
current M	lailing Address:		New Mailing Address	s:
O BOX 9 ORAL SE	9323 PRINGS, FL 33075	5 US		
El Number	: 65-0390881 FI	El Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired (X)
lame and	Address of Curr	ent Registered Agent:	Name and Address of	of New Registered Agent:
	, DAVID . 108TH AVENUE PRINGS, FL 33065	5 US		
ORAL SI	T(11400, 1 E 00000	3 66		
he above	,		ourpose of changing its registere	d office or registered agent, or both,
he above	named entity subre of Florida.		ourpose of changing its registere	d office or registered agent, or both,
he above the State	named entity subrest of Florida.			d office or registered agent, or both,  Date
The above of the State	named entity subrest of Florida.  RE:  Electronic S	nits this statement for the <sub>l</sub>		
The above the State SIGNATUI	named entity subrest of Florida.  RE:  Electronic S	mits this statement for the price of Registered Agree ist Fund Contribution ( ).	ent	
The above the State SIGNATUI	e named entity subre e of Florida. RE: Electronic S mpaign Financing Tru	mits this statement for the prignature of Registered Agreet Fund Contribution ( ).  RS: ete	ent	Date
The above to the State SiGNATUR  Rection Car  DFFICER:  attitude:  attitude:	e named entity subre of Florida.  RE: Electronic S  mpaign Financing Tru  S AND DIRECTOR  D () Dele  BARRETT, DAVID D  3960 N.W. 108TH D	mits this statement for the principle of Registered Agriculture of Registered Agriculture (1).  RS:  ete  RIVE FL 33065  ete L 718	ent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTOR

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 D BARRETT D 02/20/2008