2004 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

changed, or on an attachment with

FERNANDO

SIGNATURE:

DOCUMENT # V50554 **Secretary of State** ISS INTERNATIONAL SECURITY SYSTEMS, INC. Mailing Address Principal Place of Business 1550 LENAPE DRIVE MIAMI SPRINGS FL 33166 1550 LENAPE DRIVE MIAMI SPRINGS FL 33166 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. . CR2E034 (11/03) Applied For City & State 4. FEI Number City & State 65-0388101 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name CARRERA, FERNANDO Street Address (P.O. Box Number is Not Acceptable) 1550 LENAPE DRIVE MIAMI SPRINGS FL 33166 Zip Code City 8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or primed name of registered agont and little II applicable. (NOTE, Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing \$5.00 May Be After May 1, 2004 Fee will be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 OFFICERS AND DIRECTORS 11. 10. Change Addition VTD ☐ Detete BILE TILE U000000050032 CARRERA, FERNANDO NAME NAME 02/13/04-80047-020 158,75 STREET ADDRESS 1550 LENAPE DRIVE STREET ADDRESS MIAMI SPRINGS FL CHTY-ST-ZIP CITY -ST-ZIP Change ☐ Addition ☐ Delete TIME TITLE NAME NAME STREET ADDRESS STREET ADDRESS ESTY-S1-78P CATY -ST - ZIP TITLE Change Addition ☐ Delete TSSS F NAME MANE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Change ☐ Celete TITLE ☐ Addition TITLE NAME NAME STREET ACCRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete BITEF NAME MAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition TITS F TITLE ☐ Delete NAME MASSE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP C37Y-ST-78P 12. I hereby certify that the information supplied with this filting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this report or supplementary poor is true and accurate and that my 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 flust eight powered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if

FEBRUARY 09, 2004

(305)888-8080

with all other like empowered

CARRERA

FILED

Feb 13, 2004 08:00 AM