

# 2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# V60057

FILED  
Apr 10, 2003  
Secretary of State

Entity Name: OUR SECURITY CORP.II.

**Current Principal Place of Business:**

8083 NW 103TH ST  
HIALEAH GARDENS, FL 33016 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 22577  
HIALEAH, FL 33002 US

**New Mailing Address:**

FEI Number: 65-0394661

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

DUNN, LOWELL S.  
8083 N W 103RD STREET  
HIALEAH, FL 33016 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DUNN, LOWELL S.,  
Address: 8083 N W 103RD STREET  
City-St-Zip: HIALEAH GARDENS, FL 33016

Title: ST ( ) Delete  
Name: DUNN, BETTY L.,  
Address: 8083 N W 103RD STREET  
City-St-Zip: HIALEAH GARDENS, FL 33016

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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: BETTY L. DUNN

ST

04/10/2003

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date