STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
***Matthew A. Brown**, Secretary of State*

Corporations Division
100 North Main Street
Providence RI 02903-1335
401 222 3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2005

Filing Period: January 1 - March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation		
66590	AVCOM TECHNOLOGY, INC.		
3. Street Address Principal Business Office	City	State	Zip
7410 POST ROAD	NORTH KINGSTOWN	RI	02852
4. Business Phone No.	5. State of Incorporation		6. SIC Code
(401) 295-4200	RHODE ISLAND		8888

7. Brief Description of the Character of Business Conducted in Rhode Island
ENGAGE IN THE SALES, SERVICE, DESIGN, INSTALLATION & RENTALOF CCTV, ACCESS CONTROL, ARTICLE DETECTION & RELATED ELEC-TRONIC SYSTEMS

8. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name	Vice President Name
Michael Sypek	Linda P. Sypek
Street Address	Street Address
59 Cobblestone Hill Road	59 Cobblestone Hill Road
City / State / Zip	City / State / Zip
Exeter / RI / 02822	Exeter / RI / 02822
Secretary Name	Treasurer Name
Linda P. Sypek	Michael Sypek
Street Address	Street Address
59 Cobblestone Hill Road	59 Cobblestone Hill Road
City / State / Zip	City / State / Zip
Exeter / RI / 02822	Exeter / RI / 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip
Director Name	Director Name
Street Address	Street Address
City / State / Zip	City / State / Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] [redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek
Signature of Officer *Date*

Linda P. Sypek
Print or Type Name of Officer

Vice President
Title of Officer

File Date 1/27/05
Check No 2817
By DA

FOR SECRETARY OF STATE USE ONLY

[redacted]

STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS
Office of the Secretary of State
Matthew A. Brown, Secretary of State

Corporations Division
100 North Main Street
Providence, RI 02903-1335
401.222.3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2004

Filing Period: January 1 - March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.	2. Name of Corporation			
66590	AVCOM TECHNOLOGY, INC.			
3. Street Address Principal Business Office		City	State	Zip
7410 POST ROAD		NORTH KINGSTOWN	RI	02852
4. Business Phone No.	5. State of Incorporation			6. SIC Code
(401) 295-4200	RHODE ISLAND			8888

7. Brief Description of the Character of Business Conducted in Rhode Island
ENGAGE IN THE SALES, SERVICE, DESIGN, INSTALLATION & RENTALOF CCTV, ACCESS CONTROL, ARTICLE DETECTION & RELATED ELEC-TRONIC SYSTEMS

8. NAMES AND ADDRESSES OF THE OFFICERS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

President Name	Vice President Name
Michael Sypek	Linda P. Sypek
Street Address: 59 Cobblestone Hill Road	Street Address: 59 Cobblestone Hill Road
City: Exeter; State: RI; Zip: 02822	City: Exeter; State: RI; Zip: 02822
Secretary Name: Linda P. Sypek	Treasurer Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road	Street Address: 59 Cobblestone Hill Road
City: Exeter; State: RI; Zip: 02822	City: Exeter; State: RI; Zip: 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS: *("X" BOX FOR ATTACHMENT)* ☐ FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name	Director Name
Street Address	Street Address
City; State; Zip	City; State; Zip
Director Name	Director Name
Street Address	Street Address
City; State; Zip	City; State; Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)* ☐

AUTHORIZED SHARES		
Number of Shares	Class/Series	Par Value
1,000 NO PAR VALUE		

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)* ☐

ISSUED SHARES		
Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be signed in ink by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

66590

File Date 1-21-04

Check No. 7197

By:

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek — 1/15/04

Signature of Officer — *Date*

Linda P. Sypek

Print or Type Name of Officer

Vice President

Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2003

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP
PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED OR PRINTED IN BLACK)

1. Corporate ID No.: 56590

2. Name of Corporation: AVCOM TECHNOLOGY, INC.

3. Street Address Principal Business Office: 7410 Post Road
City: North Kingstown State: RI Zip: 02852

4. Business Phone No.: (401) 295-4200

5. State of Incorporation: RHODE ISLAND

6. SIC Code: 8888

7. Brief Description of the Character of Business Conducted in Rhode Island: Commercial Audio & Video Equipment

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* ~~FILL IN SPACES BEFORE USING ATTACHMENTS~~

President Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

Vice President Name: Linda P. Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

Secretary Name: Linda P. Sypek
Street Address: 59 cobblestone Hill Road
City: Exeter State: RI Zip: 02822

Treasurer Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] *66590*

File Date: 1-14-03

Check No.: 60631

By: [redacted]

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek 1-13-03
Signature of Officer *Date*

Linda P. Sypek
Print or Type Name of Officer

Vice President
Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Edward S. Inman, III, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2002

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 66590
2. Name of Corporation: AVCOM TECHNOLOGY, INC.
3. Street Address Principal Business Office: 7410 Port Road — City: North Kingstown — State: RI — Zip: 02852
4. Business Phone No.: (401) 295-4200
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 8888
7. Brief Description of the Character of Business Conducted in Rhode Island: Commercial Audio & Video Equipment

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Vice President Name: Linda P. Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Secretary Name: Linda P. Sypek
Street Address: 50 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Treasurer Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

* 6 6 5 9 0 *

2002 FEB 27 P 1:03

File Date: FILED

Check No.: MAR 01 2002

By: By Corp Section

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek — 1/31/02
Signature of Officer — *Date*

Linda P. Sypek
Print or Type Name of Officer

Vice President
Title of Officer

Form 630 12/01

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2001

Filing Period: January 1-March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 66590
2. Name of Corporation: AVCOM TECHNOLOGY, INC.
3. Street Address Principal Business Office: 7410 POST ROAD — City: NORTH KINGSTOWN — State: RI — Zip: 02920
4. Business Phone No.: (401) 295-4200
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 8888
7. Brief Description of the Character of Business Conducted in Rhode Island: Commercial Audio & Video Equipment

8. ~~NAMES AND ADDRESSES OF THE OFFICERS~~ *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Vice President Name: Linda P. Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Secretary Name: Linda P. Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Treasurer Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 SHS	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

66590

File Date: 1/30

Check No.: 5446

By: JL

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek — 1/8/2001
Signature of Officer — *Date*

Linda P. Sypek
Print or Type Name of Officer

Vice President
Title of Officer

[redacted]

Form 630 12/00

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

STOP
PLEASE READ INSTRUCTIONS

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 2000

Filing Period: January 1-March 1 • Filing Fee: $50.00

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 66590
2. Name of Corporation: AVCON TECHNOLOGY, INC.
3. Street Address Principal Business Office: 30 PHENIX AVENUE
   City: CRANSTON State: RI Zip: 02920
4. Business Phone No.: (401) 946-7080
5. State of Incorporation: RHODE ISLAND
6. SIC Code:
7. Brief Description of the Character of Business Conducted in Rhode Island: Deisgn, Sales, & Installation of Industrial & Commercial Audio & Video Equipment.

8. NAMES AND ADDRESSES OF THE OFFICERS (*"X" BOX FOR ATTACHMENT*) FILL IN SPACES BEFORE USING ATTACHMENTS

President Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

Vice President Name: Linda P. Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

Secretary Name: Linda Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

Treasurer Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter State: RI Zip: 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS (*"X" BOX FOR ATTACHMENT*) FILL IN SPACES BEFORE USING ATTACHMENTS

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

Director Name
Street Address
City State Zip

10. SHARES AUTHORIZED (*"X" BOX FOR ATTACHMENT*)

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 SHS	NO PAR VALUE	

11. SHARES ISSUED (*"X" BOX FOR ATTACHMENT*)

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted]

66590

File Date: JAN 10 2000 WD 4469

Check No.: SEC'Y OF STATE

By:

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek 1/6/2000
Signature of Officer *Date*

Linda P. Sypek
Print or Type Name of Officer

Vice President
Title of Officer

Form 630 12/96

AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-222-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1999

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: **66590**

2. Name of Corporation: **AVCOM TECHNOLOGY, INC.**

3. Street Address Principal Business Office: 30 PHENIX AVENUE — City: CRANSTON — State: RI — Zip: 02920

4. Business Phone No.: (401) 946-7080

5. State of Incorporation: **RHODE ISLAND**

6. SIC Code: **0000**

7. Brief Description of the Character of Business Conducted in Rhode Island:

Design, Sales, & Installation of Industrial & Commerical Audio & Video Equip.

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

President Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Vice President Name: Linda P. SYpek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Secretary Name: Linda Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

Treasurer Name: Michael Sypek
Street Address: 59 Cobblestone Hill Road
City: Exeter — State: RI — Zip: 02822

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)* **FILL IN SPACES BEFORE USING ATTACHMENTS**

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

Director Name
Street Address
City — State — Zip

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 SHS	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1,000	Common	No Par

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] *66590*

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Linda P. Sypek — 2/8/99
Signature of Officer — *Date*

Linda P. SYpek
Print or Type Name of Officer

Vice President
Title of Officer

File Date: Feb 9 99

Check No.: 3587

By: SD. TC

FOR SECRETARY OF STATE USE ONLY

[redacted]

Form 31 12/96

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT FOR THE YEAR 1998

Filing Period: January 1–March 1 • Filing Fee: $50.00

STOP PLEASE READ INSTRUCTIONS

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.: 66590
2. Name of Corporation: AVCOM TECHNOLOGY, INC.
3. Street Address Principal Business Office: 30 Phenix Avenue — City: Cranston — State: RI. — Zip: 02920
4. Business Phone No.: (401) 946-7080
5. State of Incorporation: RHODE ISLAND
6. SIC Code: 5888
7. Brief Description of the Character of Business Conducted in Rhode Island: Audio Video & Surveillance Products

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)*

President Name: Michael Sypek
Street Address: 174 Smith Hill Road
City: Harrisville — State: R.I. — Zip:

Vice President Name: Linda Sypek
Street Address: 174 Smith Hill Road
City: Harrisville — State: RI. — Zip:

Secretary Name: Linda Sypek
Street Address: 174 Smith Hill Road
City: Harrisville — State: R.I — Zip:

Treasurer Name: Michael Sypek
Street Address: 174 Smith Hill Road
City: Harrisville — State: RI. — Zip:

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)*

Director Name: N/A
Street Address:
City: — State: — Zip:

Director Name: N/A
Street Address:
City: — State: — Zip:

Director Name:
Street Address:
City: — State: — Zip:

Director Name:
Street Address:
City: — State: — Zip:

10. SHARES AUTHORIZED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	Class/Series	Par Value
1,000 SHS	NO PAR VALUE	

11. SHARES ISSUED *("X" BOX FOR ATTACHMENT)*

ISSUED SHARES

Number of Shares	Class/Series	Par Value
1000	A	NO

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

* 6 6 5 9 0 *

File Date: 1.22.98
Check No.: 0507
By: LW

FOR SECRETARY OF STATE USE ONLY

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer — Date: 1-21-98

Michael Sypek
Print or Type Name of Officer

President
Title of Officer

STATE OF RHODE ISLAND
AND PROVIDENCE PLANTATIONS
Office of the Secretary of State

James R. Langevin, Secretary of State
Corporations Division
100 North Main Street, Providence, RI 02903-1335
401-277-3040

PROFIT CORPORATION ANNUAL REPORT 1997

Filing Period: January 1-March 1 • Filing Fee: $50.00

STOP: PLEASE READ INSTRUCTIONS BEFORE COMPLETING THIS FORM

(FORM MUST BE TYPED IN BLACK)

1. Corporate ID No.
66590

2. Name of Corporation
AVCOM TECHNOLOGY, INC.

3. Street Address Principal Business Office
30 Phenix Ave.

City CRANSTON *State* R.I. *Zip* 02920

4. Business Phone No.
(401) 946-7080

5. State of Incorporation
RHODE ISLAND

6. SIC Code
8888

7. Brief Description of the Character of Business Conducted in Rhode Island
Audio video & Surveillance Products

8. NAMES AND ADDRESSES OF THE OFFICERS *("X" BOX FOR ATTACHMENT)*

President Name
Michael Sypek
Street Address
174 Smith Hill Road
City HARRISVILLE *State* R.I. *Zip*

Vice President Name
Linda Sypek
Street Address
174 Smith Hill Rd
City HARRISVILLE *State* R.I. *Zip*

Secretary Name
Linda Sypek
Street Address
174 Smith Hill Rd
City HARRISVILLE *State* R.I. *Zip*

Treasurer Name
Michael Sypek
Street Address
174 Smith Hill Road
City HARRISVILLE *State* R.I. *Zip*

9. NAMES AND ADDRESSES OF THE DIRECTORS *("X" BOX FOR ATTACHMENT)*

Director Name
N/A
Street Address
City *State* *Zip*

Director Name
NA
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

Director Name
Street Address
City *State* *Zip*

10. SHARES AUTHORIZED AND ISSUED *("X" BOX FOR ATTACHMENT)*

AUTHORIZED SHARES

Number of Shares	*Class/Series*	*Par Value*
1,000 SHS	NO	PAR VALUE

ISSUED SHARES

Number of Shares	*Class/Series*	*Par Value*
1000	A	NO

This report must be **signed in ink** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

[redacted] *66590

File Date: 2/9/97

Check No.: 1562

By: CCT

FOR SECRETARY OF STATE USE ONLY

[redacted]

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer *Date* 1/31/97

Michael Sypek
Print or Type Name of Officer

President
Title of Officer

ANNUAL REPORT

1996

Filing Period: January 1–March 1
Filing Fee: $50.00

James R. Langevin, *Secretary of State*
Corporations Division
100 North Main Street
Providence, Rhode Island 02903-1335 • (401) 277-3040

PLEASE TYPE OR PRINT IN BLACK INK.

1. CORPORATE ID NO.: 66590

2. NAME OF CORPORATION: SURVEILLANCE PRODUCTS, INC. Satellite Sndo + Video Audio Tech

3. STREET ADDRESS PRINCIPAL BUSINESS OFFICE: 30 Phenix Avenue — CITY: Cranston — STATE: R.I. — ZIP CODE: 02920

4. BUSINESS PHONE NO.: (401) 946-7080

5. STATE OF INCORPORATION: RHODE ISLAND

6. SIC CODE: 8888

7. BRIEF DESCRIPTION OF THE CHARACTER OF BUSINESS CONDUCTED IN RHODE ISLAND: Surveillance Products

8. NAMES AND ADDRESSES OF THE OFFICERS

PRESIDENT NAME: Michael Sypek
STREET ADDRESS: 174 Smith Hill Road
CITY: Harrisville — STATE: R.I. — ZIP CODE:

VICE PRESIDENT NAME: Linda Sypek
STREET ADDRESS: 174 Smith Hill Road
CITY: Harrisville — STATE: R.I. — ZIP CODE:

SECRETARY NAME: Linda Sypek
STREET ADDRESS: 174 Smith Hill Road
CITY: Harrisville — STATE: R.I. — ZIP CODE:

TREASURER NAME: Michael Sypek
STREET ADDRESS: 174 Smith Hill Road
CITY: Harrisville — STATE: R.I. — ZIP CODE:

9. NAMES AND ADDRESSES OF THE DIRECTORS

DIRECTOR NAME: N/A
STREET ADDRESS:
CITY: — STATE: — ZIP CODE:

DIRECTOR NAME:
STREET ADDRESS:
CITY: — STATE: — ZIP CODE:

DIRECTOR NAME:
STREET ADDRESS:
CITY: — STATE: — ZIP CODE:

DIRECTOR NAME:
STREET ADDRESS:
CITY: — STATE: — ZIP CODE:

10. SHARES AUTHORIZED AND ISSUED

AUTHORIZED SHARES			ISSUED SHARES		
NUMBER OF SHARES	CLASS / SERIES	PAR VALUE	NUMBER OF SHARES	CLASS / SERIES	PAR VALUE
1,000 SHS NO PAR VALUE			1,000	A	NO PAR

This report must be **SIGNED IN INK** by either the President, Vice President, Secretary, Assistant Secretary, Treasurer, Receiver or Trustee

Under penalty of perjury, I declare and affirm that I have examined this report, including any accompanying schedules and statements, and that all statements contained herein are true and correct.

Signature of Officer

Michael Sypek
Print or Type Name of Officer

President — 1-24-96
Title of Officer — Date

File Date: 1/24/96
Check No: 2330
By: CP

For Secretary of State Use Only

DETACH BOTTOM BEFORE RETURNING

FORM 31 12/95

State of Rhode Island and Providence Plantations
Office of The Secretary of State
100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

ANNUAL REPORT
Please Type or Print
File Annually – Jan. 1 - March 1
Filing Fee $50.00
Make Checks Payable to: Secretary of State

ALL ENTRIES MUST BE COMPLETED IN FULL OR THE FORM WILL BE RETURNED.

Corporate ID: 0066590 Annual Report for the year: 1995

Name of Corporation: SURVEILLANCE PRODUCTS, INC.

Business entity organized under the laws of the State of: R. I.

For foreign entity, address and telephone number of principal office:

Phone: ( )

Business Entity is (check one):
[✓] Business Corporation (See RIGL Chapter 7-1.1)
[ ] Professional Service Corporation (See RIGL Chapter 7-5.1)

Brief statement of the character of business conducted in Rhode Island:
Surveillance Products

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box):
30 Phenix Avenue
Cranston, R.I. 02920

Phone: (401) 946-7080

THE NAMES OF THE OFFICERS ARE:

	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
PRESIDENT	Michael Sypek	174 Smith Hill Rd.	Harrisville R.I.	
VICE PRESIDENT	Linda Sypek	"	"	
SECRETARY	Linda Sypek	"	"	
TREASURER	Michael Sypek	"	"	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (Rider may be attached)		NUMBER OF SHARES ISSUED AND OUTSTANDING (Rider may be attached)	
Number of Shares	Class / Series	Number of Shares	Class / Series
~~2000~~ 1000	A- Voting Common	1000	A- Voting - Common

Date February 10, 1995

By: Michael S. Sypek
PRINT OR TYPE NAME OF OFFICER SIGNING
President
TITLE OF OFFICER SIGNING

Form 31 1/95

DESIGNATED REGISTERED AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the registered office and/or registered agent indicated below is incorrect, Form 9 must be filed.

SAMUEL L. DISANO, ESQ.
23 SHORT ROAD
BARRINGTON RI 02806

FILED
MAR 2 8 1995
By cc 7619

Filing Fee $50.00
Payable to
Secretary of State

PLEASE TYPE or PRINT

State of Rhode Island and Providence Plantations
Office of The Secretary of State

100 North Main Street
Providence, Rhode Island 02903-1335
401-277-3040

File Annually
LLC Sept. 1 - Nov. 1
CORP Jan. 1 - March 1

Corporate ID: 0086590 Annual Report for the year: 1994

Name of Business Entity: SURVEILLANCE PRODUCTS, INC.

Business entity organized under the laws of the State of: R.I.

Federal Taxpayer Identification Number: [redacted]

For foreign entity, address and telephone number of principal office

Phone ( )

Address and telephone of the principal office of business entity in Rhode Island (Provide street address - Not P.O. Box)

23 Short Rd.
Barrington, R.I. 02806

Phone (401) 245-3643

Business Entity is (check one):

- [x] Business Corporation (See RIGL Chapter 7-1.1)
- [ ] Professional Service Corporation (See RIGL Chapter 7-5.1)
- [ ] Limited Liability Company (See RIGL 7-16)

Name, title and mailing address of contact person to whom communications may be directed

Linda Sypek, Secretary
227 Phenix Ave.
Cranston, R.I. 02920
(401) 946-7080

Brief statement of the character of business conducted in Rhode Island:

Surveillance Products

Date of Organization: 1-2-92

Date of Qualification to do business in Rhode Island (if foreign entity):

THE NAMES OF THE OFFICERS ARE:

	NAME	STREET ADDRESS	CITY/STATE	ZIP CODE
[ ] CHIEF EXECUTIVE OFFICER OR [x] PRESIDENT (Check One)	Michael Sypek	174 Smith Hill Rd.	Harrisville R.I.	
[ ] CHIEF OPERATING OFFICER OR [ ] VICE PRESIDENT (Check One)				
[ ] CUSTODIAN OF RECORDS OR [ ] SECRETARY (Check One)	Linda Sypek	174 Smith Hill Rd	Harrisville R.I.	
[ ] CHIEF FINANCIAL OFFICER OR [x] TREASURER (Check One)	Linda Sypek	174 Smith Hill Rd.	Harrisville R.I.	
	Michael Sypek	174 Smith Hill Rd.	Harrisville R.I.	

THE NAMES OF THE DIRECTORS ARE:

NAME	STREET ADDRESS	CITY/STATE	ZIP CODE

NUMBER OF SHARES AUTHORIZED (If Applicable)	NUMBER OF SHARES ISSUED AND OUTSTANDING (If Applicable)
NUMBER 3000	NUMBER 1000
CLASS common - voting	CLASS common voting
SERIES A	SERIES A
PAR VALUE OR WITHOUT PAR ✓	PAR VALUE OR WITHOUT PAR ✓

Date 1/26 19 94 ✓

By: Michael Sypek
PRESIDENT
PRINT OR TYPE NAME OF OFFICER SIGNING

TITLE OF OFFICER SIGNING

FILED
FEB 07 1994
By 1659

Form 31 - 94

DESIGNATED REGISTERED OR RESIDENT AGENT FOR SERVICE OF PROCESS:

PLEASE NOTE: If the Corporation has changed its registered office and/or registered or resident agent, Form 9 or Form LLC 3 must be filed

SAMUEL L. DI SANO, ESQ.
23 SHORT ROAD
BARRINGTON RI 02806

Filing Fee $50.00

To be filed annually between January 1st and March 1st

State of Rhode Island and Providence Plantations

CORPORATIONS DIVISION
100 NORTH MAIN STREET
PROVIDENCE, RHODE ISLAND 02903

Corporate ID 000590 Annual Report for the year 1993

FIRST: The name of the corporation is SURVEILLANCE PRODUCTS, INC.

SECOND: It is incorporated under the laws of RHODE ISLAND

THIRD: Character of business, briefly stated, is Engage in the sales, service, design, installatic and rental of CCTV, Access Control, Article Detection and related electronic systems.

FOURTH: If foreign corporation, address of its principal office

FIFTH: Business address in Rhode Island 227 Phenix Avenue
Cranston, RI 02920

SIXTH: Names and addresses of its directors and officers: (Attach rider if necessary)

Name	Office	Address (including number, street, zip code)
	Director	
	Director	
	Director	
Michael Sypek	President	174 Smith Hill Rd, Harrisville, RI 02830
Linda Sypek	Vice President	174 Smith Hill Rd, Harrisville, RI 02830
Linda Sypek	Secretary	174 Smith Hill Rd, Harrisville, RI 02830
Michael Sypek	Treasurer	174 Smith Hill Rd, Harrisville, RI 02830

SEVENTH: Number of Shares authorized:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000			No Par

EIGHTH: Number of Shares issued:

No. of Shares	Class	Series	Par Value or statement that shares are without par value
1,000			No Par

PAID
FEB 08 1993
SEC'Y OF STATE

Dated January 29 19 93

SURVEILLANCE PRODUCTS, INC.
(Name of Corporation)

By

(Report must be signed by an officer)

Title PRESIDENT