

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000039768

FILED  
Jan 06, 2009  
Secretary of State

Entity Name: AIC BUREAU OF INVESTIGATIONS & PROTECTIVE SERVICE INC.

## Current Principal Place of Business:

5074 NW 74TH AVE.  
MIAMI, FL 33166

## New Principal Place of Business:

5074 NW 74 AVE.  
MIAMI, FL 33166

## Current Mailing Address:

PO BOX 7935  
MIAMI, FL 332557935

## New Mailing Address:

FEI Number: 65-1001927      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

ALONSO, JUAN F  
6332 SW 22ND STREET  
MIAMI, FL 33155      US

## Name and Address of New Registered Agent:

ALONSO, JUAN F  
BOX 7935  
MIAMI, FL 33255      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: JUAN F. ALONSO

01/06/2009

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PVST ( ) Delete  
Name: ALONSO, JUAN F  
Address: 6332 SW 22ND STREET  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: ALONSO, JUAN F  
Address: 6332 SW 22ND STREET  
City-St-Zip: MIAMI, FL 33155

Title: VP ( ) Delete  
Name: ALONSO, MARIA E  
Address: 6332 SW 22 ST  
City-St-Zip: MIAMI, FL 33155

Title: D ( ) Delete  
Name: ALONSO, FRANK  
Address: 6332 SW 22 ST  
City-St-Zip: MIAMI, FL 33155

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PVST (X) Change ( ) Addition  
Name: ALONSO, JUAN F  
Address: BOX 7935  
City-St-Zip: MIAMI, FL 33255

Title: D (X) Change ( ) Addition  
Name: ALONSO, JUAN F  
Address: BOX 7935  
City-St-Zip: MIAMI, FL 33255

Title: VP (X) Change ( ) Addition  
Name: ALONSO, MARIA E  
Address: BOX 7935  
City-St-Zip: MIAMI, FL 33255

Title: D (X) Change ( ) Addition  
Name: ALONSO, FRANK  
Address: BOX 7935  
City-St-Zip: MIAMI, FL 33255

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: MARIA ALONSO

VP

01/06/2009

Electronic Signature of Signing Officer or Director

Date