# I hereby 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 all other like empowered.

PSTD

#### SIGNATURE: JACKIE DULIN

Electronic Signature of Signing Officer/Director Detail

# DOCUMENT# P01000082283

## Entity Name: AAA PROFESSIONAL SECURITY SERVICES, INC.

2020 FLORIDA PROFIT CORPORATION ANNUAL REPORT

### Current Principal Place of Business:

1727 COACHMAN PLAZA DR. UNIT 103-104 CLEARWATER , FL 33759

#### **Current Mailing Address:**

PO BOX 1522 CLEARWATER, FL 33757

#### FEI Number: 59-3755959

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

DULIN, JACKIE L 736 ISLAND WAY #804 CLEARWATER, FL 33756 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:

Electronic Signature of Registered Agent

#### Officer/Director Detail :

TitlePSTDNameDULIN, JACKIE L;Address736 ISLAND WAY, # 804City-State-Zip:CLEARWATER BEACH FL 33767

Certificate of Status Desired: No

Date

06/09/2020

Date