

**2021 FLORIDA PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000037393

**Entity Name:** ALL PRO PROTECTIVE SERVICES, INC.

**Current Principal Place of Business:**

2515 SANDS RD  
LAKELAND, FL 33810

**Current Mailing Address:**

PO BOX 91302  
LAKELAND, FL 33803 US

**FEI Number: 50-0028069**

**Certificate of Status Desired: No**

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

CRIFASI, CHRIS R  
2515 SANDS RD  
LAKELAND, FL 33810 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

\_\_\_\_\_ Date

**Officer/Director Detail :**

Title            P  
Name            CRIFASI, CHRIS R  
Address        PO BOX 91302  
City-State-Zip: LAKELAND FL 33810

*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.*

**SIGNATURE: CHRIS CRIFASI**

**PRESIDENT**

**04/27/2021**

\_\_\_\_\_ Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_ Date