## 2020 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000140372

Entity Name: PROTECTION PLUS SERVICES LLC

illy Name. PROTECTION PLOS SERVICES L

**Current Principal Place of Business:** 

1136 NW 7TH TERRACE FORT LAUDERDALE, FL 33311

**Current Mailing Address:** 

1136 NW 7TH TERRACE

FORT LAUDERDALE. FL 33311 US

FEI Number: 84-1999817 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

UNITED STATES CORPORATION AGENTS, INC. 5575 S. SEMORAN BLVD SUITE 36 ORLANDO, FL 32822 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

FILED Apr 07, 2020

**Secretary of State** 

2953188849CC

Authorized Person(s) Detail:

Title AMBR Title AMBR

NameTELEMAQUE, GARRYNameTELAMAQUE, MARIE RAddress1136 NW 7TH TERRACEAddress1136 NW 7TH TERRACE

City-State-Zip: FORT LAUDERDALE FL 33311 City-State-Zip: FORT LAUDERDALE FL 33311

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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: GARRY TELEMAQUE

**OWNER** 

04/07/2020