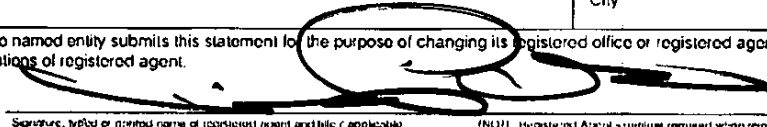
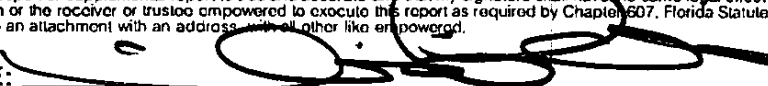


2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2007 8:00 am
Secretary of State

01-24-2007 90047 033 ***150.00

DOCUMENT # 194719 1. Entity Name SOUTH FLORIDA DETECTIVE BUREAU INC					
Principal Place of Business SOUTH FLORIDA DETECTIVE BUREAU, INC 1401 NE 117TH STREET MIAMI FL 33161 US			Mailing Address SOUTH FLORIDA DETECTIVE BUREAU, INC 1401 NE 117TH STREET MIAMI FL 33161 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc		Suite, Apt. #, etc			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-1940963 ☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
POLERO, WILLIAM 1401 NE 117 ST. MIAMI FL 33161			Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE  2/12/07					
FILE NOW!!! FEE IS \$150.00 After May 1, 2007 Fee Will Be \$550.00 Make Check Payable to Florida Department of State				9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	NAME	STREET ADDRESS	CITY- ST- ZIP	TITLE	NAME
P	POLERO, WILLIAM	1401 N.E. 117 STREET	MIAMI FL 33161	☐ Delete	☐ Change ☐ Addition
D	POLERO, JAMIE	1401 N.E. 117 STREET	MIAMI FL 33161	☐ Delete	☐ Change ☐ Addition
				☐ Delete	☐ Change ☐ Addition
				☐ Delete	☐ Change ☐ Addition
				☐ Delete	☐ Change ☐ Addition
				☐ Delete	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:  2/12/07					

**SOUTH FLORIDA
DETECTIVE BUREAU, INC.**
1401 N.E. 117TH ST.
MIAMI, FL 33161