## 2006 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# F05000006741

Entity Name: TRINITY PROTECTION SERVICES, INC

FILED Aug 14, 2006 Secretary of State

Entity Nai	me: IRINITY	PROTECTION SERVICES, INC	J.		
Current Principal Place of Business:			New Principal Place	of Business:	
9315 LAR( LARGO, M	GO DR, SUITE 11D 20774	≣ 230			
Current Mailing Address:			New Mailing Addres	ss:	
	TWIND DR A, FL 34233				
FEI Number	: 52-2291365	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:			Name and Address	Name and Address of New Registered Agent:	
2731 EXE	VICES, INC. CUTIVE PARI , FL 33331	CDRIVE, SUITE 4 US			
	e named entity e of Florida.	submits this statement for the p	ourpose of changing its registere	ed office or registered agent, or both,	
SIGNATU	RE:				
	Electro	nic Signature of Registered Age	ent	Date	
		93(2)(b), F.S., the corporation did nong Trust Fund Contribution ( ).	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PDT ( HOLLIS, DARF 6222 GOTHIC BOWIE, MD 2	LN	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DVS ( HOLLIS, TINA 6222 GOTHIC BOWIE, MD 2		Title: Name: Address: City-St-Zip:	() Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the 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: DARREN G. HOLLIS PRES 08/14/2006