

2007 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L04000034147

FILED
Jun 22, 2007
Secretary of State

Entity Name: FOXBOROUGH INVESTIGATIONS & SECURITY, LLC

Current Principal Place of Business:

3400 LAKESIDE DRIVE, 6TH FLOOR
MIRAMAR, FL 33024

New Principal Place of Business:

15322 FIORENZA CIRCLE
DELRAY BEACH, FL 33446

Current Mailing Address:

3400 LAKESIDE DRIVE, 6TH FLOOR
MIRAMAR, FL 33024

New Mailing Address:

15322 FIORENZA CIRCLE
DELRAY BEACH, FL 33024

FEI Number: 74-3121293 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the limited liability company did not receive the prior notice.

Name and Address of Current Registered Agent:

FARASH, SOL
3400 LAKESIDE DRIVE, 6TH FLOOR
MIRAMAR, FL 33024 US

Name and Address of New Registered Agent:

FARASH, SOL
15322 FIORENZA CIRCLE
DELRAY BEACH, FL 33446 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: _____

06/22/2007

Electronic Signature of Registered Agent

Date

MANAGING MEMBERS/MANAGERS:

Title: MGR () Delete
Name: FARASH, SOL
Address: 3400 LAKESIDE DRIVE, 6TH FLOOR
City-St-Zip: MIRAMAR, FL 33024

ADDITIONS/CHANGES:

Title: MGR (X) Change () Addition
Name: FARASH, SOL
Address: 15322 FIORENZA CIRCLE
City-St-Zip: DELRAY BEACH, FL 33446

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this 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 608, Florida Statutes.

SIGNATURE: SOL FARASH

PRES

06/22/2007

Electronic Signature of Signing Managing Member, Manager, or Authorized Representative / Date