

2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L07000017694

FILED
Feb 01, 2008
Secretary of State

Entity Name: OPTIMIST SECURITY & PROTECTION LLC

Current Principal Place of Business:

4120 NW 21ST AVENUE
OAKLAND PARK, FL 33309

New Principal Place of Business:

1601 N PALM AVE
309D
PEMBROKE PINES, FL 33026

Current Mailing Address:

4120 NW 21ST AVENUE
OAKLAND PARK, FL 33309

New Mailing Address:

1601 N PALM AVE
309D
PEMBROKE PINES, FL 33026

FEI Number: 20-8457301

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

DUCLAS & DUCLAS LLC
701 PROMENADE DRIVE
SUITE.210
PEMBROKE PINES, FL 33026 US

Name and Address of New Registered Agent:

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

MANAGING MEMBERS/MANAGERS:

Title: MGRM () Delete
Name: GAYLE, ROYDEL
Address: 4120 NW 21ST AVENUE APT.204
City-St-Zip: OAKLAND PARK, FL 33309

Title: MGRM () Delete
Name: FRANCOEUR, DANES
Address: 4120 NW 21ST AVENUE APT.204
City-St-Zip: OAKLAND PARK, FL 33309

Title: MGRM () Delete
Name: BARNES, PATRICK
Address: 4120 NW 21ST AVENUE APT.204
City-St-Zip: OAKLAND PARK, FL 33309

Title: MGRM () Delete
Name: CLARKE, SEYMOUR
Address: 4120 NW 21ST AVENUE APT.204
City-St-Zip: OAKLAND PARK, FL 33309

ADDITIONS/CHANGES:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROYDEL GAYLE

MGRM

02/01/2008

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