2008 LIMITED LIABILITY COMPANY ANNUAL REPORT

FILED
Jun 09, 2008
Secretary of State

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Entity Name: DPW PROTECTIVE SERVICES, LLC

Current Principal Place of Business:

4766 WEST COMMERCIAL BLVD
TAMARAC, FL 33319

New Principal Place of Business:

4778 WEST COMMERCIAL BLVD
TAMARAC, FL 33319

Current Mailing Address:

4766 WEST COMMERCIAL BLVD
TAMARAC, FL 33319

New Mailing Address:

4778 WEST COMMERCIAL BLVD
TAMARAC, FL 33319

FEI Number: 26-1592640 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

COHEN, HOWARD A
ONE FINANCIAL PLAZA, SUITE 1400
100 S.E. THIRD AVENUE
FT. LAUDERDALE, FL 333940030 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: HUBER, PHILLIP G
Address: 4766 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

Title: MGRM ( ) Delete
Name: SCHIRA, WILLIAM
Address: 4766 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

Title: MGRM ( ) Delete
Name: HIXON, DONALD
Address: 4766 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

Title: MGRM ( ) Delete
Name: WILLIAMS, KEVIN
Address: 4766 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

ADDITIONS/CHANGES:

Title: MGRM (X) Change ( ) Addition
Name: HUBER, PHILLIP G
Address: 4778 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

Title: MGRM (X) Change ( ) Addition
Name: SCHIRA, WILLIAM
Address: 4778 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

Title: MGRM (X) Change ( ) Addition
Name: HIXON, DONNIE C
Address: 4778 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

Title: MGRM (X) Change ( ) Addition
Name: WILLIAMS, KEVIN
Address: 4778 WEST COMMERCIAL BLVD
City-St-Zip: TAMARAC, FL 33319

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: DONNIE C. HIXON MGRM 06/09/2008

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