2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000007672

Name:

Address:

City-St-Zip:

AMEDA, MARC

P.O. BOX 170321

HIALEAH, FL 33017

Entity Name: DOHZEN SECURITY SCHOOL, CORP.

FILED Feb 03, 2004 Secretary of State

•		,		
Current Principal Place of Business:			New Principal Plac	ce of Business:
4320 NW ⁻ MIAMI, FL	182ND STREE ¹ 33055	Т		
Current Mailing Address:			New Mailing Addre	ess:
4320 NW [*] MIAMI, FL	182ND STREE [®] 33055	Т		
FEI Number:	: 30-0025735	FEI Number Applied For()	FEI Number Not Applicable ()	Certificate of Status Desired ()
Name and Address of Current Registered Agent:			Name and Address of New Registered Agent:	
BAIN, HEF 4320 NW ⁷ MIAMI, FL	182ND STREE	Т		
	named entity see of Florida.	ubmits this statement for the	ourpose of changing its registe	ered office or registered agent, or both,
SIGNATU				
	Electron	ic Signature of Registered Ag	ent	Date
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS	
Title: Name: Address: City-St-Zip:	D () BAIN, HERZEN 4320 NW 182NI MIAMI, FL 3305		Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TRUS () BAIN, FRANCOI 4320 NW 182NI MIAMI, FL 3305	O STREET	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	TRUS () BAIN, ALEX 19942 NW 2ND MIAMI, FL 3316		Title: Name: Address: City-St-Zip:	() Change () Addition
Title:	TRUS ()	Delete	Title:	() Change () Addition

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

Name:

Address:

City-St-Zip:

SIGNATURE: HERZEN BAIN PRES 02/03/2004