2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N11087

FILED Mar 22, 2005 Secretary of State

Entity Name: PROFESSIONAL LAW ENFORCEMENT ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:	
405 NW	36 ST			
TE 120 IIAMI, FL	33166 US			
urrent Mailing Address:		New Mailing Address:		
405 NW : TE 120	36 ST			
IIAMI, FL	33166 US			
El Number	: 65-0116869	FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired (X)
ame and	l Address of C	urrent Registered Agent:	Name and Addre	ss of New Registered Agent:
AW OFFICES OF ANDRE ROUVIERE 001 PONCE DE LEON TE 214			LAW OFFICES OF ANDRE ROUVIERE 2701 SOUTH BAYSHORE DRIVE STE 315	
	ABLES, FL 33°	134 US	COCONUT GROV	/E, FL 33133 US
ho above		ubmits this statement for the	ournose of changing its regis	torod office or registered egent, or be
	e named entity s e of Florida.	submits this statement for the p	ourpose or changing its regis	tered office of registered agent, of bo
the State			ourpose of changing its regis	tered office or registered agent, or bo 03/22/2005
the State	e of Florida.			
the State	e of Florida.	ROUVIERE ic Signature of Registered Ag	ent	03/22/2005
the State IGNATUI FFICER: tte: ame: ddress:	e of Florida. RE: ANDRE A Electron S AND DIRECT PD ()	ROUVIERE ic Signature of Registered Ag FORS: Delete DWARD, DOMINGO PIPER CIR	ent	03/22/2005 Date
the State	e of Florida. RE: ANDRE A Electron S AND DIREC PD () MONTOUTE-HO 1431 W SANDP PEMBROKE PIR	ic Signature of Registered Ag FORS: Delete WARD, DOMINGO PIPER CIR NES, FL 33026 Delete ST	ent ADDITIONS/CHA Title: Name: Address:	03/22/2005 Date NGES TO OFFICERS AND DIRECT
the State IGNATUI FFICER: ttle: ame: ddress: tty-St-Zip: ttle: ame: ddress:	e of Florida. RE: ANDRE A Electron S AND DIRECT PD () MONTOUTE-HC 1431 W SANDP PEMBROKE PIR SD () FITTS, LUCY 6219 SW 57TH SOUTH MIAMI,	C. ROUVIERE ic Signature of Registered Ag FORS: Delete PWARD, DOMINGO PIPER CIR NES, FL 33026 Delete ST FL 33143 Delete EY STREET	ent ADDITIONS/CHA Title: Name: Address: City-St-Zip: Title: Name: Address:	03/22/2005 Date NGES TO OFFICERS AND DIRECT () 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.

SIGNATURE: DOMINGO MONTOUTE-HOWARD PD 03/22/2005