

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000003718

FILED
Apr 21, 2009
Secretary of State

Entity Name: A.L.A.S. ASOCIACION LATINOAMERICANA DE SEGURIDAD, INC.

Current Principal Place of Business:

4493 WOODFIELD BOULEVARD
BOCA RATON, FL 33434 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 522810
MIAMI, FL 33152 US

New Mailing Address:

FEI Number: 65-0772307

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KEMPER, FRANS T MR.
4493 WOODFIELD BOULEVARD
BOCA RATON, FL 33434 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

OFFICERS AND DIRECTORS:

Title: ED () Delete
Name: KEMPER, FRANS T MR.
Address: 4493 WOODFIELD BOULEVARD
City-St-Zip: BOCA RATON, FL 33434 US

Title: D () Delete
Name: FLETCHER, GEORGE
Address: 4493 WOODFIELD BOULEVARD
City-St-Zip: BOCA RATON, FL 33434 US

Title: D () Delete
Name: FERRANDO, ANDREA
Address: WOODFIELD BOULEVARD
City-St-Zip: BOCA RATON, FL 33434 US

Title: D () Delete
Name: DE LA VEGA, HUMBERTO
Address: CIRCUMVALACION OTE 201B DESPACPO 3
City-St-Zip: LEON, MEXICO, TN 37160

Title: D () Delete
Name: EDUARDO, VARGAS
Address: 840 N. WORLD THIRD STREET SUITE 600
City-St-Zip: MILWAUKEE, WI 53203

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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:

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 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: KEMPER FRANNS T

ED

04/21/2009

Electronic Signature of Signing Officer or Director

Date