2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # P0100041638 1. Entity Name S.E.S. LAW ENFORCEMENT INC. Principal Place of Business 2009 FAULK DRIVE TALLAHASSEE, FL 32303 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc.							. Interest	FIL 04 APR 28 SECRETARY ALLAHASSE Chg-P	引		
City & Sta	te		City & State				4. FEI Numb			Applied For	
Zip		Country	Žip Country					of Status Desired	S8.75 A	dditional	
	6. Name	and Address of Current	Registered Agent	7. Name and Address of New Registered Agent							
BOWDEN, DANIEL 3841-A KILLEARN CT. TALLAHASSEE, FL 32308						Name BOWDEN, DANIEL Street Address (P.O. Box Number is Not Acceptable) 2009 FAULK DRIVE City TALLAHASSEE FL Zip Code 32303					
8. The above named entity submits this statement for the purpose of changing its registered office or register								th, in the State of Flo	fida. I am familiar with	and accept	
SIGNATURE Annual August Daniel J. Bowden Sonature. hyped or dringed name of registered agent and title I applicable. (NOTE: Registered Agent signature required when renstaging) FILE NOW!!! FEE IS \$150.00: 9. Election Campaign Financing \$5.00 May Be											
After May 1, 2004 Fee will be \$550,00 Trust Fund Contribution. Added to Fees										•	
10.		OFFICERS AND		11.			ADDITIONS/	CHANGES TO OFFI	CERS AND DIRECTOR	3S IN 11	
TITLE	D.	, KEITH A	☐ Delete	! TITLE ! Name		DEP	DIME	KEITH A	Change:	Addition	
STREET ADDRESS CITY-ST-ZIP	759 LUPII TALLAHA	STRE	et address •ST-ZIP	1018	SOLDI EDA	ER CREE	EK COURT	-			
TITLE	M'		☐ Delete	: TITLE	,	ρ			Change	Addition	
NAME		, DANIEL J	•	NAME BOY			DEN, C	ANIEL J	•	-	
. Street adoress City-St-Zip	s 3841-A KILLEARN COURT ST TALLAHASSEE, FL 32309					TAI	MUAS.	LK DRIV 56E.FL	E 27202		
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NAME				NAME			. 81	000357	772128 003 **15		
STREET ADDRESS CITY-ST-ZIP				i,	ST-ZIP		05/07	7/0401082 	003 **150	0.00	
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NAME:			CT3 Delate	NAME					() Change	C.J Addition	
STREET ADDRESS CITY-ST-ZIP					t address St-zip						
TITLE. NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete						Change	Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered. SIGNATURE: Danie J. Bowden 4/28/04 (850) 893-0606 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR? Date Da											