

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000044893

Entity Name: CITIZEN PROTECTION, INC

FILED  
Apr 23, 2008  
Secretary of State

## Current Principal Place of Business:

711 71ST  
MIAMI BEACH, FL 33141

## New Principal Place of Business:

## Current Mailing Address:

258 SUNNY ISLE BLVD  
SUNNY ISLE, FL 33160

## New Mailing Address:

711-71 ST  
MIAMI BEACH, FL 33141

FEI Number: 65-1100018

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

FRAGA, ADA  
711 71 ST  
MIAMI BEACH, FL 33141 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

Election Campaign Financing Trust Fund Contribution ( ).

## OFFICERS AND DIRECTORS:

Title: PSD ( ) Delete  
Name: FRAGA, ADA D  
Address: 258 SUNNY ISLE BLVD  
City-St-Zip: SUNNY ISLE, FL 33160

Title: D ( ) Delete  
Name: RIVERO, JOSE M  
Address: 258 SUNNY ISLE BLVD  
City-St-Zip: SUNNY ISLE, FL 33160

Title: VP ( ) Delete  
Name: CHAVEZ, ALEX  
Address: 258 SUNNY ISLES BLVD  
City-St-Zip: SUNNY ISLES, FL 33160

Title: SD ( ) Delete  
Name: ALONSO, JOSE  
Address: 258 SUNNY ISLE BLVD  
City-St-Zip: NORTH MIAMI BEACH, FL 33160

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PSD (X) Change ( ) Addition  
Name: FRAGA, ADA D  
Address: 711-71 ST  
City-St-Zip: MIAMI BEACH, FL 33141

Title: D (X) Change ( ) Addition  
Name: RIVERO, JOSE M  
Address: 711-71 ST  
City-St-Zip: MIAMI BEACH, FL 33141

Title: VP (X) Change ( ) Addition  
Name: CHAVEZ, ALEX  
Address: 711-71 ST  
City-St-Zip: MIAMI BEACH, FL 33141

Title: SD (X) Change ( ) Addition  
Name: ALONSO, JOSE  
Address: 711-71 ST  
City-St-Zip: MIAMI BEACH, FL 33141

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: ADA D FRAGA

PRES

04/23/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date