


# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jun 13, 2008 8:00 am**  
**Secretary of State**

06-13-2008 90001 023 \*\*\*150.00

<b>DOCUMENT # P01000107908</b>	
1. Entity Name L.A. EXECUTIVE PROTECTION SERVICE INC.	

Principal Place of Business 9855 SW 152ND TERRACE MIAMI, FL 33157	Mailing Address 9855 SW 152ND TERRACE MIAMI, FL 33157
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

40108328



05082008 Chg-P CR2E034 (12/06)

4. FEI Number 65-1154031	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent  BENNETT, LEPOLDEN 9855 SW 152ND TERRACE MIAMI, FL 33157	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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8. 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. I am familiar with, and accept the obligations of registered agent.	
SIGNATURE:  Lepolden Bennett	DATE: 6-10-08

<b>FILE NOW!!! FEE IS \$150.00 Due by September 12, 2008</b>	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BENNETT, LEPOLDEN 9855 SW 152ND TERRACE MIAMI, FL 33157 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BENNETT, AVIS ESTERS 9855 SW 152 TERRACE MIAMI, FL 33357 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  Lepolden Bennett	DATE: 6-10-08

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FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS



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## 2008 Annual Report

Listed below is the most recent information reported for the entity. Please review and click the 'Continue' button at the bottom to generate the annual report form.

**\*\* The document number, business name and file date cannot be changed on the report. \*\***

**Document Number** P01000107908

**Business Entity Name** L.A. EXECUTIVE PROTECTION SERVICE INC.

**Original File Date** 11/07/2001

**FEI Number** 65-1154031

**Principal Address** 9855 SW 152ND TERRACE  
MIAMI, FL 33157

**Mailing Address** 9855 SW 152ND TERRACE  
MIAMI, FL 33157

**Registered Agent** LEPOLDEN BENNETT  
9855 SW 152ND TERRACE  
MIAMI, FL 33157

### Officer/Director Name And Address

D  
LEPOLDEN BENNETT  
9855 SW 152ND TERRACE  
MIAMI, FL 33157

V  
AVIS ESTERS BENNETT  
9855 SW 152 TERRACE  
MIAMI, FL 33357

If all of the above  
information is correct  
and you do not wish  
to make any changes,  
please select:

If you need to make  
changes to the above  
information, please  
select: