

# 2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P01000108169

FILED  
Apr 10, 2008  
Secretary of State

**Entity Name:** EXECUTIVE PROTECTION AND INVESTIGATIVE AGENCY, INC.

**Current Principal Place of Business:**

15476 NW 77 CT  
#443  
MIAMI LAKES, FL 33016

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 680357  
N.MIAMI, FL 33168

**New Mailing Address:**

**FEI Number:** 65-1151627

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

GUADARRMA, FELIX  
15476 NW 77 CT  
#443  
MIAMI LAKES, FL 33016 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: D ( ) Delete  
Name: GUADARRAMA, FELIX  
Address: 15476 NW 77 CT #443  
City-St-Zip: MIAMI LAKES, FL 33016

Title: O ( ) Delete  
Name: ROSEN, DAVID  
Address: 700 NE 124 ST  
City-St-Zip: NORTH MIAMI, FL 33161

Title: O ( ) Delete  
Name: ALMAGUER, RENE  
Address: 700 NE 124 ST  
City-St-Zip: NORTH MIAMI, FL 33161

**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:

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:** FELIX GUADARRAMA

PRES

04/10/2008

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

\_\_\_\_\_  
Date