## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000007896

Entity Name: PREMIER PROTECTIVE SERVICES, INC.

FILED Mar 18, 2004 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 

6201 SW 138 CT 15713 S. W. 60 STREET MIAMI, FL 33193

MIAMI, FL 33183

**New Mailing Address: Current Mailing Address:** 

6201 SW 138 CT 15713 S. W. 60 STREET MIAMI, FL 33193

MIAMI, FL 33183

FEI Number: 27-0027497 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

AROSEMENA, ABDIEL AROSEMENA, ABDIEL 6201 SW 138 CT 15713 S. W. 60 STREET MIAMI, FL 33193

MIAMI, FL 33183 US

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: ABDIEL AROSEMENA 03/18/2004

> Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Delete Title: (X) Change ( ) Addition AROSEMENA, ABDIEL AROSEMENA, ABDIEL Name: Name: 6201 SW 138 CT, L 15713 S. W. 60 STREET Address: Address: City-St-Zip: MIAMI, FL 33183 US City-St-Zip: MIAMI, FL 33193 US

Title: Title: () Change () Addition () Delete

Name: AROSEMENA, ARCHIBALDO Name: 333 NW 132 PL Address: Address: MIAMI, FL 33182 US City-St-Zip: City-St-Zip:

Title: Title: ( ) Delete () Change () Addition

BARNFIELD, ALEYDA Name: Name: 333 NW 132 PL Address: Address: City-St-Zip: MIAMI, FL 33182 US City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 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.

Ρ SIGNATURE: ABDIEL AROSEMENA 03/18/2004