## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000050432

FILED Apr 21, 2004 Secretary of State

Entity Name: ALLIANCE SECURITY, & PROTECTIVE SERVICES, INC.

Current Principal Place of Business:		New Principal Place of Business:	
4701 NW 16 ST LAUDERHILL, FL	333135523		
Current Mailing Address:		New Mailing Address:	
160 NW 176 ST # MIAMI, FL 33169	302-3		
FEI Number: 04-3699	FEI Number Applied For (	) FEI Number Not Applicable ( ) Certificate of Status Desired ( )	)
Name and Address of Current Registered Agent:		nt: Name and Address of New Registered Agent:	
LEWIS, ALVIN 4701 NW 16 ST LAUDERHILL, FL	333135523 US		
The above named	entity submits this statement for	the purpose of changing its registered office or registered agent, or b	ooth,
The above named	entity submits this statement for	the purpose of changing its registered office or registered agent, or b	ooth,
The above named in the State of Flor	entity submits this statement for ida.		ooth,
The above named in the State of Flor	entity submits this statement for		ooth,
The above named in the State of Flor SIGNATURE:E	entity submits this statement for ida.	d Agent Date	ooth,
The above named in the State of Flor SIGNATURE:  Election Campaign F	entity submits this statement for ida.  Electronic Signature of Registere  inancing Trust Fund Contribution (	d Agent Date	
The above named in the State of Flor SIGNATURE:  Election Campaign F  OFFICERS AND I  Title: P  Name: LEWIS  Address: 4701 N	entity submits this statement for ida.  Electronic Signature of Registere  inancing Trust Fund Contribution (	d Agent Date	

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.

SIGNATURE: ALVIN LEWIS P 04/21/2004