

# **2009 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT**

DOCUMENT# P02000075196

**FILED**  
**Apr 20, 2009**  
**Secretary of State**

**Entity Name:** BUREAU INTELLIGENCE INVESTIGATOR AND SECURITY PREVENTIVE, INC.

**Current Principal Place of Business:**

5301 NW 189TH STREET  
MIAMI, FL 330555315

**New Principal Place of Business:**

**Current Mailing Address:**

5301 NW 189TH STREET  
MIAMI, FL 330555315

**New Mailing Address:**

**FEI Number:** 42-1545308

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

RODRIGUEZ MEDINA, PEDRO  
5301 NW 189TH STREET  
MIAMI, FL 330555315 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

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: RODRIGUEZ-MEDINA, PEDRO  
Address: 5301 NW 189TH STREET  
City-St-Zip: MIAMI, FL 330555315

Title: VPD ( ) Delete  
Name: FIGUEREDO, FELIX  
Address: 5301 NW 189TH STREET  
City-St-Zip: MIAMI, FL 330555315

Title: STD ( ) Delete  
Name: RODRIGUEZ, ARACELI C  
Address: 5301 NW 189TH STREET  
City-St-Zip: MIAMI, FL 330555315

**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: PEDRO-RODRIGUEZ MEDINA

DIR

04/20/2009

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

\_\_\_\_\_  
Date