

2006 FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# P02000131443

FILED
Oct 02, 2006
Secretary of State**Entity Name:** CONGRESSIONAL INTELLIGENCE PROTECTIVE SERVICES INC.**Current Principal Place of Business:**1350 NE 125 ST.
SUITE 201
NORTH MIAMI, FL 33161**New Principal Place of Business:**1350 NE 125 ST.
SUITE 201
NORTH MIAMI, FL 33161 US**Current Mailing Address:**1350 NE 125 ST.
SUITE 201
NORTH MIAMI, FL 33161**New Mailing Address:**1350 NE 125 ST.
SUITE 201
NORTH MIAMI, FL 33161 US**FEI Number:** 03-0496101**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired (X)****Name and Address of Current Registered Agent:**LENCHNER, MURRAY
1350 NE 125 ST.
SUITE 201A
NORTH MIAMI, FL 33161 US**Name and Address of New Registered Agent:**LENCHNER, MURRAY
1350 NE 125 ST.
SUITE 201
NORTH MIAMI, FL 33161 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:_____
Electronic Signature of Registered Agent

10/02/2006

Date**OFFICERS AND DIRECTORS:****Title:** DTS () Delete
Name: WEINSTEIN, MARVIN
Address: 1350 N.E. 125 STREET, STE 201A
City-St-Zip: NORTH MIAMI, FL 33161**Title:** PD () Delete
Name: LENCHNER, MURRAY
Address: 1350 NE 125 ST. SUITE 201
City-St-Zip: NORTH MIAMI, FL 33161**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** DTS (X) Change () Addition
Name: OLIVA, ROSEMARY
Address: 1350 N.E. 125 STREET, STE 201
City-St-Zip: NORTH MIAMI, FL 33161 US**Title:** PD (X) Change () Addition
Name: LENCHNER, MURRAY
Address: 1350 NE 125 ST. SUITE 201
City-St-Zip: NORTH MIAMI, FL 33161 US

I hereby certify that the information supplied with this filing does not qualify for the 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: MURRAY LENCHNER_____
Electronic Signature of Signing Officer or Director

PD

10/02/2006

Date