

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000003322

FILED
May 02, 2006
Secretary of State

Entity Name: PENTAGON PROTECTIVE SERVICES, INC.

Current Principal Place of Business:

6801 NW 77TH AVE., SUITE 102
MIAMI, FL 33166

New Principal Place of Business:

12298 NW 106 CT
MEDLEY, FL 33178

Current Mailing Address:

6801 NW 77TH AVE., SUITE 102
MIAMI, FL 33166

New Mailing Address:

12298 NW 106 CT
MEDLEY, FL 33178

FEI Number: FEI Number Applied For (X) FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

OLIU, OCTAVIO H
6801 NW 77TH AVE., SUITE 102
MIAMI, FL 33166 US

Name and Address of New Registered Agent:

OLIU, OCTAVIO H
12298 NW 106 CT
MEDLEY, FL 33166 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:

05/02/2006

Electronic Signature of Registered Agent

Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: OLIU, OCTAVIO H
Address: 6801 NW 77TH AVE., SUITE 102
City-St-Zip: MIAMI, FL 33166

Title: D () Delete
Name: OLIU, OCTAVIO J
Address: 6801 NW 77TH AVE., SUITE 102
City-St-Zip: MIAMI, FL 33166

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: OLIU, OCTAVIO H
Address: 12298 NW 106 CT
City-St-Zip: MEDLEY, FL 33178

Title: D (X) Change () Addition
Name: OLIU, OCTAVIO J
Address: 12298 NW 106 CT
City-St-Zip: MEDLEY, FL 33166

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: OCTAVIO OLIU

PD

05/02/2006

Electronic Signature of Signing Officer or Director

Date