

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000015018

FILED  
Apr 08, 2010  
Secretary of State

**Entity Name:** SOUTH FLORIDA SECURITY SERVICES, INC.

**Current Principal Place of Business:**

14104 SW 276 WAY  
HOMESTEAD, FL 33032

**New Principal Place of Business:**

5201 BLUE LAGOON DR. SUITE 833  
MIAMI, FL 33126

**Current Mailing Address:**

14104 SW 276 WAY  
HOMESTEAD, FL 33032

**New Mailing Address:**

5201 BLUE LAGOON DR. SUITE 833  
MIAMI, FL 33126

**FEI Number:** 16-1652877

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

DELGADO, AGUSTÍN A  
14104 SW 276 WAY  
HOMESTEAD, FL 33032 US

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

DELGADO, AGUSTIN A  
14104 SW 276 WAY  
HOMESTEAD, FL 33032 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:** AGUSTIN A DELGADO

04/08/2010

Electronic Signature of Registered Agent

Date

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** DELGADO, AGUSTIN A  
**Address:** 14104 SW 276 WAY  
**City-St-Zip:** HOMESTEAD, FL 33032 US

**Title:** SECR  
**Name:** SULLIVAN, CHRIS  
**Address:** 14104 SW 276 WAY  
**City-St-Zip:** HOMESTEAD, FL 33032

**Title:** VP  
**Name:** GIL, HUMBERTO R VICE PR  
**Address:** 2907 42 ST. SW  
**City-St-Zip:** LEHIGH ACRES, FL 33976

I hereby 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 all other like empowered.

**SIGNATURE:** AGUSTIN A DELGADO

PRES

04/08/2010

Electronic Signature of Signing Officer or Director

Date