

2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000020351

FILED
Jan 31, 2008
Secretary of State

Entity Name: LAKES PROTECTIVE SERVICE, INC.

Current Principal Place of Business:

6784 ORCHID DRIVE
MIAMI, FL 33014 US

New Principal Place of Business:

Current Mailing Address:

6784 ORCHID DRIVE
MIAMI, FL 33014 US

New Mailing Address:

FEI Number: 74-3081388

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RODRIGUEZ, ANTONIA
19461 NW 77CT
HIALEAH, FL 33015 US

Name and Address of New Registered Agent:

RODRIGUEZ, ANTONIA
6784 ORCHID DR
MIAMI LAKES, FL 33014 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:

01/31/2008

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: VAZQUEZ, RAUL
Address: 6784 ORCHID DRIVE
City-St-Zip: MIAMI, FL 33014 US

Title: D () Delete
Name: VAZQUEZ, HERMINIA
Address: 6784 ORCHID DR
City-St-Zip: MIAMI LAKES, FL 33014

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: RODRIGUEZ, ANTONIA G
Address: 6784 ORCHID DR
City-St-Zip: MIAMI LAKES, FL 33014

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: RAUL VAZQUEZ

D

01/31/2008

Electronic Signature of Signing Officer or Director

Date