

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000024099

FILED
Mar 26, 2007
Secretary of State

Entity Name: MAXIMUM PROTECTION SECURITY, INC.

Current Principal Place of Business:

367 NW 4TH ST
FLORIDA CITY, FL 33034

New Principal Place of Business:

Current Mailing Address:

367 NW 4TH ST
FLORIDA CITY, FL 33034

New Mailing Address:

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

Name and Address of Current Registered Agent:

MARC LUBIN
367 NW 4ST
FLORIDA CITY
FL, FL 33034 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

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LUBIN, MARC
Address: 367 NW 4TH ST
City-St-Zip: FLORIDA CITY, FL 33034

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: LUBIN, MARC
Address: 367 N.W. 4TH ST
City-St-Zip: FLORIDA CITY, FL 33034

Title: VP () Change (X) Addition
Name: MARC, PETIT
Address: 367 N.W. 4TH ST
City-St-Zip: FLORIDA CITY, FL 33034

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: ML

PD

03/26/2007

Electronic Signature of Signing Officer or Director

Date