

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P05000073363

FILED
Apr 30, 2007
Secretary of State

Entity Name: INTERNATIONAL SERVICES OF ELITE SECURITY, INC.

Current Principal Place of Business:

1022 LAKELAND HILLS BLVD.
SUITE 4
LAKELAND, FL 33805 US

New Principal Place of Business:

123 N. KENTUCKY AVE
SUITE 212
LAKELAND, FL 33801 US

Current Mailing Address:

1022 LAKELAND HILLS BLVD.
SUITE 4
LAKELAND, FL 33805 US

New Mailing Address:

123 N. KENTUCKY AVE
SUITE 212
LAKELAND, FL 33801 US

FEI Number: 20-2887955

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ELLISON, ALLEN L
1022 LAKELAND HILLS BLVD.
SUITE 4
LAKELAND, FL 33805 US

Name and Address of New Registered Agent:

ELLISON, ALLEN L
123 N. KENTUCKY AVE
SUITE 212
LAKELAND, FL 33801 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: ALLEN L. ELLISON

04/30/2007

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: ELLISON, ALLEN L
Address: 835 COLLEGE AVE
City-St-Zip: LAKELAND, FL 33813 US

Title: VP () Delete
Name: SHOWERS, STEVE
Address: 1501 SHEPHERD RD.
City-St-Zip: LAKELAND, FL 33831 US

Title: D () Delete
Name: DAUGHTRY, RONALD
Address: 10714 NORTH CONNECHUSETT
City-St-Zip: TAMPA, FL 33617 US

Title: D (X) Delete
Name: MORALES, RAFAEL L
Address: 711 VICHY LANE
City-St-Zip: KISSIMMEE, FL 34759 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ELLISON, ALLEN L
Address: 835 COLLEGE AVE
City-St-Zip: LAKELAND, FL 33801 US

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

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

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

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: ALLEN L. ELLISON

P

04/30/2007

Electronic Signature of Signing Officer or Director

Date