

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 12, 2007 8:00 am**  
**Secretary of State**

DOCUMENT # P06000018481

1. Entity Name

ZIOUI SECURITY PROTECTION, INC.



04-12-2007 90051 001 \*\*\*\*\*8.75

04-12-2007 90051 002 \*\*\*150.00

Principal Place of Business

5819 MOSLEY STREET  
HOLLYWOOD FL 33021

Mailing Address

5819 MOSLEY STREET  
HOLLYWOOD FL 33021



2. Principal Place of Business - No P.O. Box #

2955 W. State RD 84

3. Mailing Address

2955 W. State RD 84

Suite, Apt. #, etc.

Suite, Apt. #, etc.

1st MOORE

CR2E034 (10/06)

City & State

FORT LAUDERDALE, FL

City & State

FORT LAUDERDALE, FL

4. FEI Number

26-0135565

Applied For

Not Applicable

Zip

33312

Country

USA

Zip

33312

Country

USA

5. Certificate of Status Desired ☒

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

ZIOUI, OMAR  
5819 MOSLEY STREET  
HOLLYWOOD FL 33021

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent (and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW!!! FEE IS \$150.00**  
**After May 1, 2007 Fee Will Be \$550.00**  
**Make Check Payable to Florida Department of State**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE P, VP ☐ Delete  
NAME ZIOUI, OMAR  
STREET ADDRESS 5819 MOSLEY STREET  
CITY ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11

TITLE Vice President ☐ Change ☒ Addition  
NAME DJAMILA - ZIOUI  
STREET ADDRESS 5819 MOSLEY ST  
CITY ST-ZIP HOLLYWOOD FL 33021

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

OMAR ZIOUI

Date

Daytime Phone #

03-31-07-9542571531