

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000104118

**FILED**  
**Apr 30, 2010**  
**Secretary of State**

**Entity Name:** ABOVE PAR LOSS PREVENTION, INC.

**Current Principal Place of Business:**

2136 NE 63 ST.  
FORT LAUDERDALE, FL 33308

**New Principal Place of Business:**

2758 W ATLANTIC BLVD  
STE 21  
POMPANO BEACH, FL 33069

**Current Mailing Address:**

6278 N FEDERAL HIGHWAY, UNIT 121  
FT LAUDERDALE, FL 33308

**New Mailing Address:**

2758 W ATLANTIC BLVD  
STE 21  
POMPANO BEACH, FL 33069

FEI Number: 20-0637750

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

ARTHUR, VINCENT L  
800 E BROWARD BLVD  
SUITE 607  
FORT LAUDERDALE, FL 33301 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: PSD  
Name: BRANDT, RICHARD  
Address: 2758 W ATLANTIC BLVD  
City-St-Zip: POMPANO BEACH, FL 33069

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: RICHARD BRANDT

P

04/30/2010

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date