2011 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P07000131790

Entity Name: DEFENSIVE FIREARMS TRAINING, INC

FILED Apr 27, 2011 Secretary of State

CUTLER BAY, FL 33189 Current Mailing Address: 9760 HAITIAN DR CUTLER BAY, FL 33189 FEI Number: 26-1599040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent:		Current Principal Place of Business:		New Principal Place of Business:	
9760 HAITIAN DR CUTLER BAY, FL 33189 FEI Number: 26-1599040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	9760 HAITIAN DR CUTLER BAY, FL 33189				
CUTLER BAY, FL 33189 FEI Number: 26-1599040 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	Current Mailing Address:		New Mailing Address	:	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:	9760 HAITIAN DR CUTLER BAY, FL 33189				
	FEI Number: 26-1599040	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired (X)	
ALEVANDRING ADDIAN	Name and Address of Current Registered Agent:		Name and Address of	Name and Address of New Registered Agent:	
9760 HAITIAN DR CUTLER BAY, FL 33189 US		US			
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or b in the State of Florida.		bmits this statement for the po	urpose of changing its registered	office or registered agent, or both	
SIGNATURE:	SIGNATURE:				
Electronic Signature of Registered Agent Date	Electronic	Signature of Registered Age	nt	Date	

Title:

ALEXANDRINO, ADRIAN Name: 9760 HAITIAN DR Address: City-St-Zip: CUTLER BAY, FL 33189

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 required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: ADRIAN M ALEXANDRINO Ρ 04/27/2011