

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P10000101593

Entity Name: SFB DETECTIVE AGENCY INC

**FILED**  
**Jan 21, 2011**  
**Secretary of State**

**Current Principal Place of Business:**

206 N FLAGLER AVE  
POMPAÑO BEACH, FL 33060

**New Principal Place of Business:**

**Current Mailing Address:**

206 N FLAGLER AVE  
POMPAÑO BEACH, FL 33060

**New Mailing Address:**

FEI Number: 80-0674241

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

FIEFE, ANDRE  
1219 EUCLID AVE 10 MIAMI BEACH FL  
MIAMI BEACH, FL 33139 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

**OFFICERS AND DIRECTORS:**

Title: P  
Name: FIEFE, ANDRE  
Address: 1219 EUCLID AVE 10 MIAMI BEACH FL 33139 US  
City-St-Zip: MIAMI BEACH, FL 33139 US

Title: VP  
Name: BIEN-AIME, LOSAIRE  
Address: 206 N FLAGLER AVE  
City-St-Zip: POMPAÑO BEACH FL 33060, FL 33060 US

Title: S  
Name: BIEN-AIME, MARC C  
Address: 400 S DIXIE HWY #5  
City-St-Zip: LAKE WORTH, FL 33460 US

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: ABDRE FIEFE

P

01/21/2011

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

\_\_\_\_\_  
Date