

# **2012 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# P11000079037

**FILED**  
**Apr 25, 2012**  
**Secretary of State**

**Entity Name:** PROTECTION INSPECTION SERVICES INC

**Current Principal Place of Business:**

1474 ARTIMINO LANE  
BOYNTON BEACH, FL 33436 US

**New Principal Place of Business:**

9279 PINEVILLE DRIVE  
LAKE WORTH, FL 33467 US

**Current Mailing Address:**

1474 ARTIMINO LANE  
BOYNTON BEACH, FL 33436 US

**New Mailing Address:**

9279 PINEVILLE DRIVE  
LAKE WORTH, FL 33467 US

**FEI Number:** 45-3221327

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ALM, ANTHONY A  
1474 ARTIMINO LANE  
BOYNTON BEACH, FL 33436 US

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

ALM, ANTHONY A  
9279 PINEVILLE DRIVE  
LAKE WORTH, FL 33467 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: \_\_\_\_\_

Electronic Signature of Registered Agent

04/25/2012

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: P  
Name: ALM, ANTHONY A  
Address: 9279 PINEVILLE DRIVE  
City-St-Zip: LAKE WORTH, FL 33467 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: ANTHONY ALM

PRES

04/25/2012

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

\_\_\_\_\_  
Date