

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P25235

FILED
Jan 07, 2009
Secretary of State

Entity Name: UNITED STATES PROTECTIVE SERVICES CORPORATION

Current Principal Place of Business:

P.O. BOX 28222
CLEVELAND, OH 441280222

New Principal Place of Business:

4734 SPRING RD.
CLEVELAND, OH 44131

Current Mailing Address:

P.O. BOX 28222
CLEVELAND, OH 441280222

New Mailing Address:

FEI Number: 34-1611633 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SIMON, MICHAEL W
3839 NW BOCA RATON BLVD
STE 100
BOCA RATON, FL 33432 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: D () Delete
Name: COHEN, GILDA,
Address: 18200 MILES ROAD
City-St-Zip: CLEVELAND, OH 44128

Title: V () Delete
Name: COHEN, MARCH
Address: 32100 TRACY LANE
City-St-Zip: SOLON, OH 44139

Title: P () Delete
Name: COHEN, JEFFREY
Address: 32573 TRAILWOOD COURT
City-St-Zip: SOLON, OH 44139

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: V (X) Change () Addition
Name: COHEN, MARC
Address: 32100 TRACY LANE
City-St-Zip: SOLON, OH 44139

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JEFFREY COHEN

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01/07/2009

Electronic Signature of Signing Officer or Director

Date