2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P39648

FILED Jan 11, 2006 Secretary of State

Entity Name: TOTAL PROTECTIVE SECURITY, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	RICK ROAD QUA, NY 117	758			
Current M	lailing Addre	ss:	New Mailing Address	s:	
	RICK ROAD QUA, NY 117	758			
FEI Number:	: 11-3002597	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address o	of New Registered Agent:	
	ANNIMADIE				
PORT OR.	ÍVEVIEW LA ANGE, FL 32		ourpose of changing its registered	d office or registered agent, or both.	
3795 GRO PORT OR. The above	ÍVEVIEW LA ANGE, FL 32		ourpose of changing its registered	d office or registered agent, or both,	
3795 GRO PORT OR. The above	VEVIEW LA ANGE, FL 32 named entity of Florida. RE:	submits this statement for the p		d office or registered agent, or both,	
3795 GRO PORT OR, The above In the State	VEVIEW LA ANGE, FL 32 named entity of Florida. RE:			d office or registered agent, or both, Date	
3795 GRO PORT OR. The above In the State SIGNATUR	VEVIEW LA ANGE, FL 32 named entity of Florida. RE: Electro	submits this statement for the p			
3795 GRO PORT OR. The above In the State SIGNATUR Election Car	VEVIEW LA ANGE, FL 32 named entity of Florida. RE: Electro	submits this statement for the particles of Registered Age and Trust Fund Contribution ().	ent		
3795 GRO PORT OR. The above In the State SIGNATUR Election Car	NEVIEW LA ANGE, FL 32 named entity e of Florida. RE: Electro mpaign Financir S AND DIREC	submits this statement for the prince Signature of Registered Ageing Trust Fund Contribution (). CTORS:) Delete EROME A., ANE	ent	Date	

I hereby certify that the information supplied with this filing does not qualify for the 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: JEROME A PASCUCCI P 01/11/2006