## 2006 FOR PROFIT CORPORATION **ANNUAL REPORT**

## Mar 06, 2006 8:00 am **Secretary of State** DOCUMENT # P93000025242 03-06-2006 90006 005 \*\*\*150.00 1. Entity Name ALLIED PROTECTION SERVICES, INC. Principal Place of Business Mailing Address 2651 PARK WINDSOR DR. PO BOX 7259 #208 FT MYERS, FL 33911-7259 US FT. MYERS, FL 33901 01062006 CR2E034 (11/05) DO NOT WRITE IN THIS SPACE Applied For 4. FEI Number 65-0399920 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent LEVINE, STEPHEN M DO NOT WRITE 2651 PARK WINDSOR DR. #208 IN THIS SPACE FT. MYERS, FL 33901 8. 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. I am familiar with, and accept the obligations of registered agent. Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) \$5.00 May Be 9. Election Campaign Financing FILE NOW!!! FEE IS \$150.00 Trust Fund Contribution. Added to Fees After May 1, 2006 Fee will be \$550.00 10. OFFICERS AND DIRECTORS LEVINE, STEPHEN M NAME STREET ADDRESS 2651 PARK WINDSOR DR #208 CITY-ST-ZIP FT. MYERS, FL NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS DO NOT WRITE CITY-ST-ZIP IN THIS SPACE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS

12. I hereby certify that the information supplied with this filting does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attaciment with an address, with an other like empowered.

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**FILED**