

**2019 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L08000016931

**Entity Name:** HEIGHTS INVESTIGATIVE & PROTECTIVE SERVICES

**Current Principal Place of Business:**

13743 SW 147TH CIRCLE  
2  
MIAMI, FL 33186

**Current Mailing Address:**

13743 SW 147TH CIRCLE  
2  
MIAMI, FL 33186 US

**FEI Number:** 26-1981671

**Certificate of Status Desired:** No

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

ARIAS, LENNY  
13743 SW 147TH CIRCLE  
2  
MIAMI, FL 33186 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

\_\_\_\_\_  
Date

**Authorized Person(s) Detail :**

Title MGR  
Name ARIAS, LENNY  
Address 13743 SW 147TH CIRCLE  
2  
City-State-Zip: MIAMI FL 33186

*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 a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.*

**SIGNATURE:** LENNY ARIAS

**MANAGER**

**04/29/2019**

\_\_\_\_\_  
Electronic Signature of Signing Authorized Person(s) Detail

\_\_\_\_\_  
Date