

**2017 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L12000033059

**Entity Name:** STATE PROTECTION SECURITY & INVESTIGATION SVC. LLC

**Current Principal Place of Business:**

638 SW 6TH STREET APT 204  
MIAMI, FL 33130

**Current Mailing Address:**

P.O.BOX 813341  
HOLLYWOOD, FL 33081 US

**FEI Number:** 38-3870077

**Certificate of Status Desired:** No

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

AKLADYOUS, RAFI HARBY  
638 SW 6TH STREET  
MIAMI , FL 33130 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 MGRM  
Name AKLADYOUS, SAMEH HARBY  
Address 1001 NORTH FEDERAL HWY  
City-State-Zip: HALLANDALE FL 33009

Title MGR  
Name AKLADYOUS, RAFI HARBY  
Address 1001 NORTH FEDERAL HWY  
City-State-Zip: HALLANDALE FL 33009

Title MGRM  
Name AKLADYOUS, RAFI HARBY  
Address 1001 NORTH FEDERAL HWY  
City-State-Zip: HALLANDALE FL 33009

Title MGR  
Name AKLADYOUS, SAMEH H  
Address 1001 NORTH FEDERAL HWY  
City-State-Zip: HALLANDALE FL 33009

*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:** SAMEH AKLADYOUS

MGR

04/09/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date