

**2016 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT**

DOCUMENT# L13000066202

**Entity Name:** GLOBAL ELITE PROTECTION & SECURITY CONSULTING LLC

**FILED**  
**Jan 25, 2016**  
**Secretary of State**  
**CC0168139343**

**Current Principal Place of Business:**

223 E FLAGLER STREET STE 504  
MIAMI, FL 33131

**Current Mailing Address:**

223 E FLAGLER STREET STE 504  
MIAMI, FL 33131

**FEI Number: 46-2748744**

**Certificate of Status Desired: Yes**

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

CHERREZ, JOSE L  
223 E FLAGLER STREET STE 504  
MIAMI, FL 33131 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            PRESIDENT  
Name            CHERREZ, JOSE L  
Address        223 EAST FLAGLER ST  
                  504  
City-State-Zip: MIAMI FL 33131

Title            MANAGER  
Name            GONZALEZ, REINALDO J  
Address        223 E FLAGLER STREET STE 504  
City-State-Zip: MIAMI FL 33131

Title            AMBR  
Name            CHERREZ, JOSE L  
Address        223 E FLAGLER STREET STE 504  
City-State-Zip: MIAMI FL 33131

Title            MGR  
Name            GONZALEZ, REINALDO J  
Address        223 E FLAGLER STREET STE 504  
City-State-Zip: MIAMI FL 33131

*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: JOSE CHERREZ**

**PRESIDENT**

**01/25/2016**

Electronic Signature of Signing Authorized Person(s) Detail

Date