

2018 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L13000164460

Entity Name: AGI INVESTIGATIONS & TRAINING SECURITY LLC**Current Principal Place of Business:**2800 WEST OAKLAND PARK BLVD
2800 WEST OAKLAND PARK BLVD
OAKLAND PARK, FL 33311**Current Mailing Address:**2800 WEST OAKLAND PARK BLVD
2800 WEST OAKLAND PARK BLVD
OAKLAND PARK, FL 33311 US**FEI Number:** APPLIED FOR**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**FRITZLIN, GUERLIN
2800 WEST OAKLAND PARK BLVD
2800 WEST OAKLAND PARK BLVD
OAKLAND PARK, FL 33311 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:** FRITZLINGUERLIN**04/30/2018**

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title	PRESIDENT
Name	PHILIPPE, SAMELYN
Address	2800 WEST OAKLAND PARK BLVD 2800 WEST OAKLAND PARK BLVD
City-State-Zip:	OAKLAND PARK FL 33311
Title	VP
Name	DEVAIS D., CORASMIN
Address	9314 WEST FORESTHILL BLVD STE #8
City-State-Zip:	WELLINGTON FL 33411

Title	TREASURER
Name	FRITZLIN, JULESAINT
Address	2800 WEST OAKLAND PARK BLVD 2800 WEST OAKLAND PARK BLVD
City-State-Zip:	OAKLAND PARK FL 33311
Title	GENERAL MANAGER
Name	SAINT JACQUES, PEGUY
Address	2800 WEST OAKLAND PARK BLVD 2800 WEST OAKLAND PARK BLVD
City-State-Zip:	OAKLAND PARK FL 33311

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: SAMELYN PHILIPPE**PRESIDENT****04/30/2018**

Electronic Signature of Signing Authorized Person(s) Detail

Date