

PORT EVERGLADES FRANCHISE APPLICATION

An application will not be deemed complete and ready for processing until all required documents and fees are received.

A separate application must be filed for each type of franchise applied for.

FRANCHISE TYPE

CHECK ONE

☐

STEAMSHIP AGENT

☐

STEVEDORE

☐

CARGO HANDLER

☐

TUGBOAT & TOWING

☐

VESSEL BUNKERING

☐

VESSEL OILY WASTE REMOVAL

☐

VESSEL SANITARY WASTE WATER REMOVAL

☒

MARINE TERMINAL SECURITY

☐

MARINE TERMINAL SECURITY

FIREARMS CARRYING SECURITY PERSONNEL

NON-FIREARMS CARRYING SECURITY PERSONNEL

Note: Applicant is the legal entity applying for the franchise. If the Applicant is granted the franchise, it will be the named franchisee. All information contained in this application shall apply only to the Applicant, and not to any parent, affiliate, or subsidiary entities.

Applicant's

Name V.O.K. Protective Services, Inc.

(Name as it appears on the certificate of incorporation, charter, or other legal documentation as applicable, evidencing the legal formation of the Applicant)

Applicant's Business Address 7791 N.W. 46th Street, Suite 213 Doral, Florida 33166

Number /

Street

City/State/Zip

Phone # (305) 216-4848

E-mail address

ootero @ vokprotective

Fax #: (786) 542-8449

Name of the person authorized to bind the Applicant (Person's signature must appear on Page 13.)

Name Omar G. Otero

Title President

Business Address 7791 N.W. 46th Street, Suite 213 Doral, Florida 33166

Number /

Street

City/State/Zip

Phone # (305) 216-4848

E-mail address

ootero @ vokproti

Fax #: (786) 542-8449

Provide the Name and Contact Information of Applicant's Representative to whom questions about this application are to be directed (if different from the person authorized to bind the Applicant):

Representative's Name Omar G. Otero

Representative's Title President

Representative's Business Address 7791 N.W. 46th Street, Suite 213 Doral, FL 33166

Number /

Street

City/State/Zip

Representative's Phone # (305) 216-4848

Representative's E-mail address

ootero @ vokprotectiv

Representative's Fax # (786) 542-8449

PLEASE COMPLETE THIS APPLICATION AND LABEL ALL REQUIRED BACKUP DOCUMENTATION TO CLEARLY IDENTIFY THE SECTION OF THE APPLICATION TO WHICH THE DOCUMENTATION APPLIES (I.E., SECTION A, B, C, etc.).

Section A

1. List the name(s) of Applicant's officers, including, CEO, COO, CFO, director(s), member(s), partner(s), shareholder(s), principal(s), employee(s), agents, and local representative(s) active in the management of the Applicant.

Officers:

Title Vice-President

First Name Omar Middle Name Alfonso

Last Name Otero

Business Street Address 7791 N.W. 46th Street, Suite 213

City, State, Zip Code Doral, FL 33166

Phone Number () 305-216-4848 Fax Number () 786-542-8449

Email Address ootero@vokprotectiveservices.com

Title _____

First Name _____ Middle Name _____

Last Name _____

Business Street Address _____

City, State, Zip Code _____

Phone Number () _____ Fax Number () _____

Email Address _____@_____.

Title _____

First Name _____ Middle Name _____

Last Name _____

Business Street Address _____

City, State, Zip Code _____

Phone Number () _____ Fax Number () _____

Email Address _____@_____.

Title _____

First Name _____ Middle Name _____

Last Name _____

Business Street Address _____

City, State, Zip Code _____

Phone Number () _____ Fax Number () _____

Email Address _____@_____.

Attach additional sheets if necessary.

2. RESUMES: Provide a resume for each officer, director, member, partner, shareholder, principal, employee, agent, and local representative(s) active in the management of the Applicant, as listed above. **Enclosed**

Section B

1. Place checkmark to describe the Applicant:

☐ Sole Proprietorship ☒ Corporation ☐ Partnership ☐ Joint Venture ☐ Limited Liability Company

2. Provide copies of the documents filed at the time the Applicant was formed including Articles of Incorporation (if a corporation); Articles of Organization (if an LLC); or Certificate of Limited Partnership or Limited Liability Limited Partnership (if a partnership). If the Applicant was not formed in the State of Florida, provide a copy of the documents demonstrating that the Applicant is authorized to conduct business in the State of Florida.

Section C

1. Has there been any change in the ownership of the Applicant within the last five (5) years? (e.g., any transfer of interest to another party)

Yes ☒ No ☐ If "Yes," please provide details in the space provided. Attach additional sheets if necessary. **Omar G. Otero transferred 40% interest to Omar A. Otero**

2. Has there been any name change of the Applicant or has the Applicant operated under a different name within the last five (5) years?

Yes ☐ No ☒ If "Yes," please provide details in the space provided, including: Prior name(s) and Date of name change(s) filed with the State of Florida's Division of Corporations or other applicable state agency. Attach additional sheets if necessary.

3. Has there been any change in the officers, directors, executives, partners, shareholders, or members of the Applicant within the past five (5) years?

Yes ☒ No ☐ If "Yes," please provide details in the space provided, including: Prior officers, directors, executives, partners, shareholders, members

Name(s) Omar Alfonso Otero

New officers, directors, executives, partners, shareholders, members

Name(s) _____

Also supply documentation evidencing the changes including resolution or minutes appointing new officers, list of new principals with titles and contact information, and effective date of changes. Attach additional sheets if necessary.

Section D

Provide copies of all fictitious name registrations filed by the Applicant with the State of Florida's Division of Corporations or other State agencies. If none, indicate "None" None.

Section E

1. Has the Applicant acquired another business entity within the last five (5) years?
Yes ___ No ☒ If "Yes," please provide the full legal name of any business entity which the Applicant acquired during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application.
If none, indicate "None" None.
2. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the acquired firm's officers, managers, employees and/or the acquired firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary. N/A
3. Has the Applicant been acquired by another business entity within the last five (5) years? Yes ___ No ☒ If "Yes," provide the full legal name of any business entity which acquired the Applicant during the last five (5) years which engaged in a similar business activity as the business activity which is the subject of this Port Everglades Franchise Application.
If none, indicate "None" None.
4. Indicate in the space provided the date of the acquisition and whether the acquisition was by a stock purchase or asset purchase and whether the Applicant herein is relying on the background and history of the parent firm's officers, managers, employees and/or the parent firm's business reputation in the industry to describe the Applicant's experience or previous business history. Attach additional sheets if necessary.

Section F

Provide the Applicant's previous business history, including length of time in the same or similar business activities as planned at Port Everglades. **We provide maritime security to port and cruise industry at Port of Miami for 26 years.**

Section G

1. Provide a list of the Applicant's current managerial employees, including supervisors, superintendents, and forepersons. **Omar G. Otero, Omar A. Otero**
2. List the previous work history/experience of the Applicant's current managerial employees, including their active involvement in seaports and length of time in the same or similar business activities as planned at Port Everglades. **Omar G. Otero in the security industry since 1998, Omar A. Otero 2010.**

Section H

List all seaports, including Port Everglades (if application is for renewal), where the Applicant is currently performing the services/operation which is the subject of this Franchise application. Use this form for each seaport listed. Photocopy additional pages as needed (one page for each seaport listed).

If none, state "None" _____.

Seaport Port Everglades Number of Years Operating at this Seaport 26 yrs.

List below all of the Applicant's Clients for which it provides services at the seaport listed above.

Client Name (Company)	Number of Years Applicant has Provided Services to this Client
Carnival Cruise Lines	26 Years

Section I

1. Provide a description of all past (within the last five (5) years) and pending litigation and legal claims where the Applicant is a named party, whether in the State of Florida or in another jurisdiction, involving allegations that Applicant has violated or otherwise failed to comply with environmental laws, rules, or regulations or committed a public entity crime as defined by Chapter 287, Florida Statutes, or theft-related crime such as fraud, bribery, smuggling, embezzlement or misappropriation of funds or acts of moral turpitude, meaning conduct or acts that tend to degrade persons in society or ridicule public morals.

The description must include all of the following:

- a) The case title and docket number
- b) The name and location of the court before which it is pending or was heard
- c) The identification of all parties to the litigation
- d) General nature of all claims being made

If none, indicate "None" None.

2. Indicate whether in the last five (5) years the Applicant or an officer, director, executive, partner, or a shareholder, employee or agent who is or was (during the time period in which the illegal conduct or activity took place) active in the management of the Applicant was charged, indicted, found guilty or convicted of illegal conduct or activity (with or without an adjudication of guilt) as a result of a jury verdict, nonjury trial, entry of a plea of guilty or nolo contendere where the illegal conduct or activity (1) is considered to be a public entity crime as defined by Chapter 287, Florida Statutes, as amended from time to time, or (2) is customarily considered to be a white-collar crime or theft-related crime such as fraud, smuggling, bribery, embezzlement, or misappropriation of funds, etc. or (3) results in a felony conviction where the crime is directly related to the business activities for which the franchise is sought.

Yes ☐ No ☒

If you responded "Yes," please provide all of the following information for each indictment, charge, or conviction:

- a) A description of the case style and docket number
- b) The nature of the charge or indictment
- c) Date of the charge or indictment
- d) Location of the court before which the proceeding is pending or was heard
- e) The disposition (e.g., convicted, acquitted, dismissed, etc.)
- f) Any sentence imposed
- g) Any evidence which the County (in its discretion) may determine that the Applicant and/or person found guilty or convicted of illegal conduct or activity has conducted itself, himself or herself in a manner as to warrant the granting or renewal of the franchise.

Section J

The Applicant must provide a current certificate(s) of insurance. Franchise insurance requirements are determined by Broward County's Risk Management Division and are contained in the Port Everglades Tariff No. 12 as amended, revised or reissued from time to time. The Port Everglades Tariff is contained in the Broward County Administrative Code, Chapter 42, and is available for inspection on line at: <http://www.porteverglades.net/development/tariff>.

Section K

1. The Applicant must provide its most recent audited or reviewed financial statements prepared in accordance with generally accepted accounting principles, or other documents and information which demonstrate the Applicant's creditworthiness, financial responsibility, and resources, which the Port will consider in evaluating the Applicant's financial responsibility.

Reviewed by the Finance Division

2. Has the Applicant or entity acquired by Applicant (discussed in Section E herein) sought relief under any provision of the Federal Bankruptcy Code or under any state insolvency law filed by or against it within the last five (5) year period?

Yes No ✓

If "Yes," please provide the following information for each bankruptcy or insolvency proceeding:

- a) Date petition was filed or relief sought
- b) Title of case and docket number
- c) Name and address of court or agency
- d) Nature of judgment or relief
- e) Date entered

3. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for the business or property of the Applicant?

Yes No ✓

If "Yes," please provide the following information for each appointment:

- a) Name of person appointed
- b) Date appointed
- c) Name and address of court
- d) Reason for appointment

4. Has any receiver, fiscal agent, trustee, reorganization trustee, or similar officer been appointed in the last five (5) year period by a court for any entity, business, or property acquired by the Applicant?

Yes No ✓

If "Yes," please provide the following information for each appointment:

- a) Name of person appointed
- b) Date appointed
- c) Name and address of court
- d) Reason for appointment

Section L

List four (4) credit references for the Applicant, one of which must be a bank. Use this format:

Name of Reference Bank of America Nature of Business Banking
Contact Name Omar Morales Title Business Solutions Ad
Legal Business Street Address 7400 NW 72 Ave.
City, State, Zip Code Medley, FL 33166
Phone Number (305) 745-7019

(Provide on a separate sheet.)

V.O.K. Protective Services, Inc.

7791 NW 46th Street, Suite 213, Doral, Florida 33166

Tel 305-216-4848 Fax 786-542-8449

ootero@vokprotectiveservices.com

www.vokprotectiveservices.com



List four (4) credit references for the Applicant, one of which must be a bank. Use this format:

Name of Reference Bank United Nature of Business Line of Credit
Contact Name Nahyme Valencia Title Business Banking Relations Manager
Legal Business Street Address: 333 E. Las Olas Blvd., 3rd Floor
City, State, Zip Code Fort Lauderdale, Florida 33301
Phone Number (786) 897-6140

List four (4) credit references for the Applicant, one of which must be a bank. Use this format:

Name of Reference AmericanExpress Nature of Business Credit Card
Contact Name _____ Title _____
Legal Business Street Address P.O. Box 1535
City, State, Zip Code El Paso, Texas 79998 1535
Phone Number (800) 492-3344

List four (4) credit references for the Applicant, one of which must be a bank. Use this format:

Name of Reference GMFinancial Nature of Business Company Vehicle Finance
Contact Name _____ Title _____
Legal Business Street Address 16600 N.W. 57 Ave.
City, State, Zip Code Miami Lakes, Florida 33014
Phone Number (305) 558-1400

Section M

1. Security: Pursuant to Port Everglades Tariff 12, Item 960, all Franchisees are required to furnish an Indemnity and Payment Bond or Irrevocable Letter of Credit drawn on a U.S. bank in a format and an amount not less than \$20,000 as required by Broward County Port Everglades Department.
2. Has the Applicant been denied a bond or letter of credit within the past five (5) years?
Yes ☐ No ☒
If "Yes," please provide a summary explanation in the space provided of why the Applicant was denied. Use additional sheets if necessary.

Section N

1. Provide a list and description of all equipment currently owned and/or leased by the Applicant and intended to be used by the Applicant for the type of service(s) intended to be performed at Port Everglades including the age, type of equipment and model number. N/A
2. Identify the type of fuel used for each piece of equipment. N/A
3. Indicate which equipment, if any, is to be domiciled at Port Everglades. N/A
4. Will all equipment operators be employees of the Applicant, on the payroll of the Applicant, with wages, taxes, benefits, and insurance paid by the Applicant?
Yes ☐ No ☐
If "No," please explain in the space provided who will operate the equipment and pay wages, taxes, benefits, and insurance, if the franchise is granted. Use additional sheets if necessary.

Section O

Provide a copy of the Applicant's current Broward County Business Tax Receipt (formerly Occupational License).

Section P

1. Provide a copy of Applicant's safety program. Enclosed
2. Provide a copy of Applicant's substance abuse policy. Enclosed
3. Provide a copy of Applicant's employee job training program/policy. Enclosed
4. Provide information regarding frequency of training. Yearly and as requested by the client.
5. Include equipment operator certificates, if any. N/A

Section Q

1. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from any federal, state, or local environmental regulatory agencies?
Yes ___ No ☒
2. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or civil penalties from the U.S. Coast Guard?
Yes ___ No ☒
3. Has the Applicant received within the past five (5) years or does the Applicant have pending any citations, notices of violations, warning notices, or fines from the Occupational Safety and Health Administration? **YES**
Yes ___ No ☒

If you responded "Yes" to any of this section's questions 1, 2, or 3 above, please provide a detailed summary for each question containing the following information:

- a) Name and address of the agency issuing the citation or notice
- b) Date of the notice
- c) Nature of the violation
- d) Copies of the infraction notice(s) from the agency
- e) Disposition of case
- f) Amount of fines, if any
- g) Corrective action taken

Attach copies of all citations, notices of violations, warning notices, civil penalties and fines issued by local, state, and federal regulatory agencies, all related correspondence, and proof of payment of fines.

4. Provide a statement (and/or documentation) which describes the Applicant's commitment to environmental protection, environmental maintenance, and environmental enhancement in the Port. **V.O.K. Protective Services, Inc. strives to emphasize the importance of maintaining a clean and safe environment wherever our workers are placed on duty to sustain the preservation of safety and clean place of work.**

Section R

Provide written evidence of Applicant's ability to promote and develop growth in the business activities, projects or facilities of Port Everglades through its provision of the services (i.e., stevedore, cargo handler or steamship agent) it seeks to perform at Port Everglades. For first-time applicants (stevedore, cargo handler and steamship agent), the written evidence must demonstrate Applicant's ability to attract and retain new business such that Broward County may determine in its discretion that the franchise is in the best interests of the operation and promotion of the port and harbor facilities. The term "new business" is defined in Chapter 32, Part 11 of the Broward County Administrative Code as may be amended from time to time.

V.O.K. Protective Services, Inc. provides services to the Cruise lines industries which promotes and develops growth in Port Everglades. Our services are part of the Cruise lines Industry.

Currently, we provide services periodically when services are requested by different agencies. We are also in a formal bidding process with Holland America and Princess Cruise Lines who dock at Port Everglades and require that we maintain this franchise and permit.

If you have checked an Applicant box for VESSEL BUNKERING, VESSEL OILY WASTE REMOVAL, VESSEL SANITARY WASTE WATER REMOVAL, OR MARINE TERMINAL SECURITY, the following additional information is required:

☐ **VESSEL BUNKERING**

Section T- A Letter of Adequacy from the U.S. Coast Guard and a copy of the applicant's operations manual approved by the U.S. Coast Guard.

Section V- A copy of the applicant's Oil Spill Contingency Plan for Marine Transportation Related Facilities approved by the U.S. Coast Guard.

Section W- A Terminal Facility Discharge Prevention and Response Certificate with a copy of an approved Oil Spill Contingency Plan from the Florida Dept. of Environmental Protection.

Section Z- An approved Discharge Cleanup Organization Certificate from the Florida Dept. of Environmental Protection which has been issued to the applicant or to its cleanup contractor with a copy of the cleanup contract showing the expiration date.

☐ **VESSEL OILY WASTE REMOVAL**

Section S - Certificate of Adequacy in compliance with the Directives of MARPOL 73/75 and 33 CFR 158, if applicable.

Section T- A Letter of Adequacy from the U.S. Coast Guard and a copy of the Applicant's operations manual approved by the U.S. Coast Guard.

Section U- A Waste Transporter License from the Broward County Environmental Protection Department identifying the nature of the discarded hazardous (or non-hazardous) material to be transported.

Section V- A copy of the Applicant's Oil Spill Contingency Plan for Marine Transportation Related Facilities approved by the U.S. Coast Guard.

Section W- A Terminal Facility Discharge Prevention and Response Certificate with a copy of an approved Oil Spill Contingency Plan from the Florida Dept. of Environmental Protection.

Section X- A Used Oil Collector, Transporter, and Recycler Certificate from the Florida Dept. of Environmental Protection.

Section Y- An Identification Certificate from the U.S. Environmental Protection Agency.

Section Z- An approved Discharge Cleanup Organization Certificate from the Florida Dept. of Environmental Protection which has been issued to the Applicant or to its cleanup contractor with a copy of the cleanup contract showing the expiration date.

☐ **VESSEL SANITARY WASTE WATER REMOVAL**

Section U- A Waste Transporter License from the Broward County Environmental Protection Department identifying the nature of the discarded hazardous (or non-hazardous) material to be transported.

Section Z1- A copy of the Applicant's operations manual.

Section Z2- A Septage Receiving Facility Waste Hauler Discharge Permit from the Broward County Water and Wastewater Services Operations Division.

☐ **MARINE TERMINAL SECURITY**

Section N1- A list of all metal detection devices, walk-through and hand held, as well as all luggage and carryon x-ray machines owned or leased, to be used or domiciled at Port Everglades. Listing must include brand name and model. N/A

Section N2- A copy of all manufacturers recommended service intervals and name of company contracted to provide such services on all aforementioned equipment. N/A

Section N3- A description of current method employed to assure all equipment is properly calibrated and functioning. N/A

Section N4- current training requirements and training syllabus for employees operating x-ray equipment. Highlight emphasis on weapon and contraband identification. Include equipment operator certificates, if any. **N/A**

Section O1- Provide copies of all local, state and federal licenses, including:

- a.** A copy of the Applicant's State of Florida Business License. **Attached**
- b.** A copy of security agency's Manager's "M" or "MB" License and a copy of the security agency's "B" or "BB" License issued by the Florida Department of Agriculture and Consumer Services.

Section P3- SECURITY GUARDS / SUPERVISORS

- a.** Provide Applicant's background requirements, education, training etc., for personnel hired as security guards. Training requirements in 33 CFR 105.210 for marine facilities. **Attached**
- b.** Provide historic annual turnover ratio for security guards. **33% a year**
- c.** Provide a copy of Applicant's job training program/policy including a copy of training curriculum and copies of all manuals and take-home materials made available to security guards. Include information regarding frequency of training. **Attached in VOK Curriculum**
- d.** Provide background requirements, experience, licensing and any and all advanced training provided to supervisory personnel. **Attached**
- e.** Provide present policy for individual communication devices either required of security guards or supplied by the employer. **Attached**
- f.** Provide procurement criteria and source as well as Applicant's certification requirements for K-9 workforce. **N/A**
- g.** Provide information on the number of security guards / supervisors currently employed or expected to be employed to provide security services at Port Everglades.

Supervisors 1
Class D Guards 10
Class G Guards _____
K-9 Handlers _____

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Background Requirements for Security Officers/Supervisors

Page 11 Section P3-a

Our staff undergoes rigorous qualification and training processes to ensure they meet the highest standards of professionalism and capability.

Security Guards

Education: High school diploma or equivalent; criminal degree preferred

Experience: 3-5 years in security, law enforcement, or military.

Licensing/Certification: State security license, TWIC card, other relevant specialized certifications and ID badges.

Background Check: Complete criminal, employment, education and drug screening.

Skills: Observation, communication, security tech proficiency, emergency response, physical fitness.

Knowledge: Security Protocols, laws, first aid.

Attributes: Integrity, detailed-oriented, team player, reliable.

Each employee must possess the required certifications and undergo thorough background checks by the TSA and FBI. We mandate continuous training, including compliance with chapter 493 of the Florida Statutes and specialized instructions and post orders regarding safeguard services before any deployment. Our employees are regularly evaluated and are commended or reprimanded based on performance and conduct. We schedule routine and random site checks in order to ensure compliance. This ensures our personnel are well-versed in responsibilities, and client-specific procedures.

Supervisors

Education:

Professional Experience: 5-7 years in security, law enforcement, or military. At least 2 years in a supervisory or leadership role within the security industry. Proven track record of managing teams, handling emergencies, and implementing security protocols. Continued monitoring and development, conflict resolution, and effective communication.

Licensing/Certification: State security license, TWIC card, other relevant specialized certifications and ID badges.

Background Check: Complete criminal, employment, education and drug screening.

Skills: Observation, communication, security tech proficiency, emergency response, physical fitness.

Knowledge: Security Protocols, laws, first aid.

Attributes: Integrity, detailed-oriented, team player, reliable.

Each employee must possess the required certifications and undergo thorough background checks by the TSA and FBI. We mandate continuous training, including compliance with chapter 493 of the Florida Statutes and specialized instructions and post orders regarding safeguard services before any deployment. Our employees are regularly evaluated and are commended or reprimanded based on performance and conduct. We schedule routine and random site checks in order to ensure compliance. This ensures our personnel are well-versed in responsibilities, and client-specific procedures.

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Devices Policy for Security Personnel

Purpose

This policy outlines the requirements and guidelines for the use of individual communication devices by security guards employed by V.O.K. Protective Services, Inc. The aim is to ensure effective communication, maintain security protocols, and enhance operational efficiency.

Scope

This policy applies to all security personnel, including full-time, part-time, and temporary employees, who are required to use communication devices as part of their duties.

Communication Devices

Communication devices include, but are not limited to, mobile phones, radios, tablets, and other electronic communication tools.

Cell Phone Policy:

The use of personal cell phones at work is discouraged as well as any personal electronic devices because it can interfere with work and be disruptive to others. Therefore, employees who bring personal cell phones to work are required to keep the ringer shut off or placed on vibrate mode when they are in the office, and to keep cell phone use confined to breaks and meal periods. Conversations should be had away from areas where other employees are working. When cell phone use interferes with the satisfactory performance of an employee's duties or disturbs others, the privilege of using a personal cell phone at work may be taken away and other disciplinary action, up to and including termination, may be imposed. The Company may provide cell phone allowances to employees in certain positions in an effort to improve efficiency and effectiveness. When cell phones are used for Company business, employees must comply with all Company policies governing conduct, including our policies prohibiting discrimination, harassment, and violence in the workplace. When using the cell phone in a public place, please remember to maintain the confidentiality of any private or confidential business information. As a courtesy to others, please shut cell phones off or place on vibrate mode during meetings.

Policy

1. Provision of Communication Devices

- **Employer-Supplied Devices**: V.O.K. Protective Services will provide communication devices to security personnel as deemed necessary for their duties. These devices remain the property of V.O.K. Protective Services, Inc., and must be returned upon termination of employment.
- **Personal Devices**: Security personnel may be required to use their personal communication devices for work purposes. In such cases, V.O.K. Protective Services, Inc., will provide a stipend or reimbursement for work-related usage.

2. Usage Guidelines

- **Work-Related Use**: Communication devices provided by the employer or used personally for work purposes must be used strictly for work-related activities. Personal use should be minimal and not interfere with job responsibilities.
- **Confidentiality**: Security personnel must ensure that all communications conducted on these devices adhere to confidentiality and data protection policies.
- **Operational Readiness**: Devices must be charged, in good working condition, and accessible at all times during the shift.
- **Professional Conduct**: Communication through these devices should be conducted in a professional and respectful manner at all times.

3. Responsibilities

- **Maintenance and Care**: Security personnel are responsible for the proper care and maintenance of the communication devices. Any damage, loss, or malfunction must be reported immediately to a supervisor.
- **Compliance**: Employees must comply with all relevant laws and regulations regarding the use of communication devices, including hands-free use while driving and other safety regulations.
 - **Security Protocols**: All communication devices must be secured with passwords or other protective measures to prevent unauthorized access.

4. Monitoring and Privacy

- **Monitoring**: V.O.K. Protective Services reserves the right to monitor the usage of employer-supplied communication devices to ensure compliance with this policy.
- **Privacy**: While personal use is allowed to a limited extent, employees should have no expectation of privacy for communications conducted on employer-supplied devices.

5. Prohibited Actions

- **Unauthorized Applications**: Installation of unauthorized applications or software on employer-supplied devices is strictly prohibited.
- **Misuse**: Any misuse of communication devices, including accessing inappropriate content, harassment, or unauthorized disclosure of information, is grounds for disciplinary action.

6. Training and Support

- **Training**: Security personnel will receive training on the proper use of communication devices, including operational procedures and security protocols.
- **Technical Support**: V.O.K. Protective Services will provide technical support for employer-supplied devices. For personal devices used for work, support will be limited to work-related applications and issues.

7. Policy Enforcement

- **Violations**: Any violations of this policy will be subject to disciplinary action, up to and including termination of employment.
- **Review and Updates**: This policy will be reviewed annually and updated as necessary to ensure compliance with new regulations and technology advancements.

Acknowledgment

All security personnel must acknowledge receipt and understanding of this policy. Signed acknowledgments will be kept in the employee's personnel file.

By adhering to this policy, V.O.K. Protective Services aims to ensure that communication devices are used effectively and securely, supporting our mission to provide top-notch security services.

Port Everglades Tariff 12

References to the Port Everglades Tariff 12 as amended or reissued: <http://www.porteverglades.net/development/tariff>

Application Fees

The following fees have been established for franchised businesses at Port Everglades. Initial processing fees are nonrefundable. A franchise is required for each category of business.

Stevedore

Initial processing fee, assignment fee, or reinstatement fee \$ 11,550.00

Annual Fee

\$ 4,200.00

Cargo Handler

Initial processing fee, assignment fee, or reinstatement fee \$ 11,550.00

Annual Fee

\$ 4,200.00

Steamship Agent

Initial processing fee, assignment fee, or reinstatement fee \$ 4,200.00

Annual Fee

\$ 2,360.00

Tugboat and Towing

Initial processing fee, assignment fee, or reinstatement fee \$ 27,300.00

Annual Fee

By Contract

Vessel Bunkering, Vessel Oily Waste Removal, Vessel Sanitary Waste Water Removal, Marine Terminal Security Service

Initial processing fee, assignment fee, or reinstatement fee \$ 4,200.00

Annual Fee

\$ 2,360.00

For first-time franchise Applicants, both the initial application fee and the annual fee must be submitted at time of application. Thereafter, annual franchise fees are due and payable each year on the franchise anniversary date, which is defined as the effective date of the franchise.

Note: Check(s) should be made payable to:

BROWARD COUNTY BOARD OF COUNTY COMMISSIONERS and be mailed with this application to:

Port Everglades Business Development Division

1850 Eller Drive, Fort Lauderdale, FL 33316

Required Public Hearing

Staff review of this application will not commence until such time as all of the above requested information and documentation has been provided and the franchise application has been determined by staff to be complete. All of the above requested information and Sections are required to be completed prior to the scheduling of the public hearing. Staff will request that the Broward County Board of County Commissioners set a public hearing to consider the franchise application and hear comments from the public. The Applicant will be notified of the Public Hearing date and is welcome to attend the Public Hearing.

By signing and submitting this application, Applicant certifies that all information provided in this application is true and correct. Applicant understands that providing false or misleading information on this application may result in the franchise application being denied, or in instances of renewal, a franchise revoked. Applicant hereby waives any and all claims for any damages resulting to the Applicant from any disclosure or publication in any manner of any material or information acquired by Broward County during the franchise application process or during any inquiries, investigations, or public hearings.

Applicant further understands that if there are any changes to the information provided herein (subsequent to this application submission) or to its officers, directors, senior management personnel, or business operation as stated in this application, Applicant agrees to provide such updated information to the Port Everglades Department of Broward County, including the furnishing of the names, addresses (and other information as required above) with respect to persons becoming associated with Applicant after its franchise application is submitted, and any other required documentation requested by Port Everglades Department staff as relating to the changes in the business operation. This information must be submitted within ten (10) calendar days from the date of any change made by the Applicant.

Applicant certifies that all workers performing functions for Applicant who are subject to the Longshore and Harbor Workers' Act are covered by Longshore & Harbor Workers' Act, Jones Act Insurance, as required by federal law.

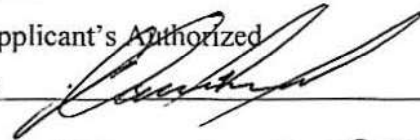
This application and all related records are subject to Chapter 119, F.S., the Florida Public Records Act.

By its execution of this application, Applicant acknowledges that it has read and understands the rules, regulations, terms and conditions of the franchise it is applying for as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended, and agrees, should the franchise be granted by Broward County, to be legally bound and governed by all such rules, regulations, terms and conditions of the franchise as set forth in Chapter 32, Part II, of the Broward County Administrative Code as amended.

The individual executing this application on behalf of the Applicant, personally warrants that s/he has the full legal authority to execute this application and legally bind the Applicant.

Signature of Applicant's Authorized

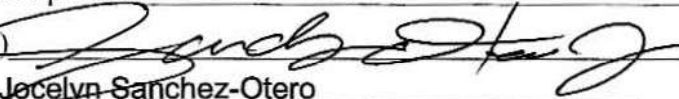
Representative



Date Signed 7/1/2024

Signature name and title - typed or printed Omar G. Otero, President

Witness Signature (*Required*)



Witness name-typed or printed Jocelyn Sanchez-Otero

Witness Signature (*Required*)



Witness name-typed or printed Irene Otero

If a franchise is granted, all official notices/correspondence should be sent to:

Name Omar G. Otero

Title President

Address 7791 NW 46th St.#213 Doral FL 33166

Phone (305) 216-4848

Omar A. Otero

5820 SW 115th Avenue • Cooper City, FL 33330 • Phone: (305) 528-1088 • e-mail: omarotero @outlook.com

- **Business Leadership**
- **Entrepreneurship Skills**
- **Private Security**
- **Management**

OBJECTIVE

Highly dedicated, disciplined, and self-motivated professional with integrity and an outstanding work ethic. Throughout my years working in the private security sector, I have employed my skills to provide exemplary service to company clients through my dedication, knowledge, and task-oriented leadership. I am technologically savvy and have used computer skills, as well as interpersonal skills, to perform my duties as best as possible. I look forward to the opportunity to join your company.

QUALIFICATIONS

Over thirteen years of experience working in the private security sector
Positive focus looking for solutions rather than just identifying problems.
Hardworking, organized, driven, reliable, and responsible

- Maximize effort to meet and exceed performance expectations

PROFESSIONAL EXPERIENCE

V.O.K. Protective Services, Inc., Miami, FL

Vice President, January 2023 to Present

Evaluate the overall state of the company and understand where it can improve and what it is doing well.
Maintain awareness of competition from local and national companies who work in similar areas and keep up to date with the overall economic landscape.
Seek expansion opportunities, like new customers, markets and industry developments. Take advantage of possible opportunities that can occur to advance the company.
Guide and direct the work of other senior leaders like assistant vice presidents or managers.
Take part in team meetings that create the overall vision of the company.
Lead various departments to work towards a specific goal each year. Collaborating with colleagues to foster a learning environment for company growth and effectiveness.

V.O.K. Protective Services, Inc., Miami, FL

General Manager, October 2015 to February 2023

Collaborating with colleagues to foster a learning environment for company growth and effectiveness.
Administrative/call center assistance
Dispatch support
Maintaining communication with clients
Maintaining communication with guards on-site
Records keeping
Assisting in finances/accounting
Assisting in branding/marketing.
Provide leadership for over 50 security officers and administrative staff.

V.O.K. Protective Services, Inc., Miami, FL

Field Supervisor, November 2012 to October 2015

Providing premier security officer service
Supervising other security staff
Ensure that detailed data about the job is transmitted to upper management
Constant communication with
Improving work environment by suggesting new procedures
Maintaining V.O.K.'s high standards for professionalism and ethics
Assisting in other duties, as assigned
Maintain employee performance by creating a strong sense of pride and responsibility among workers.

PROFESSIONAL EXPERIENCE (Continued)

V.O.K. Protective Services, Inc., Miami, FL

Security Officer, August 2010 to November 2012

- Guard entrances and screen guests/employees
- Monitor clients' premises
- Protect clients' assets, employees and guests
- Deter crime with visual presence
- Organize response in the case of fire, evacuation, or other emergency
- Respond to customer and employee health emergencies and accidents
- Eject unwanted customers or trespassers
- Liaison with police and city emergency responders

LEADERSHIP EXPERIENCE

- **Attained strong skills in leadership, operations management, and liaison with federal, state, and local officials.**

SKILLS/QUALIFICATIONS

Fluent in English and Spanish (Bilingual)

Computer Skills

Work with Microsoft Office, Adobe Photoshop, and Adobe Illustrator

Enjoy connecting with clients/customers and demonstrating an enthusiastic and positive attitude

Open to working in various departments throughout the company, and engaging with different associates, customers, and managers

Ability to work as a team player in a fast-paced environment, handling multiple priorities and quickly learning new procedures

Demonstrate knowledge of products and/or services

Ability to meet or exceed customer service and loyalty program standards

Ability to communicate effectively with clients/customers, colleagues and management

Ability to handle physical requirements to accomplish daily responsibilities

Ability to work a flexible schedule

Adhere to company policy and compliance procedure

REFERENCES

Available upon request

Omar G. Otero

19727 NW 84th Place • Miami, Florida 33015 • Phone: (305) 216-4848 • e-mail: omarotero@bellsouth.net

♦ CEO ♦ Business Administration ♦ Leadership ♦ Security

EDUCATION AND TRAINING CERTIFICATIONS

Criminal Justice and Security Services

- **2013, Orlando, FL Central Office**
 - Pilot Department of Transportation Escort and Flagging Certification
- **2008-Present, Port Security Certifications (Florida Statute s.311.12)**
 - Department of Homeland Security
 - U.S. Coast Guard
 - FDLE
 - Broward Sheriff's Office Corrections Academy
- **2002, The Professional Career Development Institute, Atlanta, GA**
 - Professional Investigator Diploma
- **2002, Applied Security Concepts, Hollywood, FL**
 - Close Protection for Celebrities and Principals Certification
- **2000, Lowndes Investigations Center**
 - Property, Liability, and Injury Claims for Private Investigators Certification
- **2000, University of Florida Division of Continuing Education**
 - Bail-Bonding and Surety Agent
- **1994, The American Federation of Police, Miami, FL**
 - Private Security School
- **1988-1989, Corrections Academy (448 hours),**
- **1983-1986, Miami Dade Community College**
 - Criminal Justice Administration
- **Relevant coursework:** Legal Studies, Emergency First Aid, Ethics and Professional Conduct, Crowd Control, Disaster Response and Reports, Patrol Techniques, Fire Prevention, and Observation Techniques

WORK EXPERIENCE

V.O.K. Protective Services, Inc., Miami, FL

President and CEO

Licensed Private Investigator

Security Specialist

1994 to Present

- Provides ethical and professional security services for a wide-ranging and diverse clientele.
- Oversees a team of more than 25 security officers and investigators.
- Manages port security for major corporations:
 - Carnival Cruise Lines
 - Royal Caribbean
 - Norwegian Cruise Line
- Supervises security for a variety of cargo companies:
 - Norton Lilly International
 - Land and Sea
 - King Ocean
 - Saint John Shipping
 - BAX Global
 - National Marine
 - Parker Host

- Globe Ship Management
- Leads and trains security guards for work in sensitive security areas:
 - Miami Seaport
 - Port Everglades
 - Fort Lauderdale International Airport Cargo Area
 - Warehouses
 - Private Residences
 - Condo Associations
- Oversees the organization and implementation of company tasks.
- Organizes security service proposals and negotiates contracts with the aforementioned corporations.
- Abides by all local, county, and federal credentials of a Security and Private Investigator Specialist as established by Chapter 493 of the Florida Statutes.

SKILLS/QUALIFICATIONS

- Fluent in oral and written English and Spanish.
- Advanced proficiency in Microsoft Word, PowerPoint, Excel, Access, and Outlook.
- Organizational skills, Detail oriented, Excellent Communication Skills



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

June 15, 1998

AMERILAWYER
343 ALMERIA AVENUE
CORAL GABLES, FL 33134

The Articles of Incorporation for V.O.K. PROTECTIVE SERVICES, INC. were filed on June 15, 1998 and assigned document number P98000053158. Please refer to this number whenever corresponding with this office regarding the above corporation.

PLEASE NOTE: COMPLIANCE WITH THE FOLLOWING PROCEDURES IS ESSENTIAL TO MAINTAINING YOUR CORPORATE STATUS. FAILURE TO DO SO MAY RESULT IN DISSOLUTION OF YOUR CORPORATION.

A CORPORATION ANNUAL REPORT MUST BE FILED WITH THIS OFFICE BETWEEN JANUARY 1 AND MAY 1 OF EACH YEAR BEGINNING WITH THE CALENDAR YEAR FOLLOWING THE YEAR OF THE FILING DATE NOTED ABOVE AND EACH YEAR THEREAFTER. FAILURE TO FILE THE ANNUAL REPORT ON TIME MAY RESULT IN ADMINISTRATIVE DISSOLUTION OF YOUR CORPORATION.

A FEDERAL EMPLOYER IDENTIFICATION (FEI) NUMBER MUST BE SHOWN ON THE ANNUAL REPORT FORM PRIOR TO ITS FILING WITH THIS OFFICE. CONTACT THE INTERNAL REVENUE SERVICE TO INSURE THAT YOU RECEIVE THE FEI NUMBER IN TIME TO FILE THE ANNUAL REPORT. TO OBTAIN A FEI NUMBER, CONTACT THE IRS AT 1-800-829-3676 AND REQUEST FORM SS-4.

SHOULD YOUR CORPORATE MAILING ADDRESS CHANGE, YOU MUST NOTIFY THIS OFFICE IN WRITING, TO INSURE IMPORTANT MAILINGS SUCH AS THE ANNUAL REPORT NOTICES REACH YOU.

Should you have any questions regarding corporations, please contact this office at the address given below.

Loria Poole, Corporate Specialist
New Filings Section

Letter Number: 498A00033163

**MINUTES OF SPECIAL MEETING OF SHAREHOLDERS
OF
V.O.K. PROTECTIVE SERVICES, INC.**

The Special Meeting of the Board of Directors was held at 7791 Northwest 46th Street, Suite 213, Doral, Florida 33166 on the 1 January 2023, at 10:30 O'clock a.m.

The following were present:

Omar G. Otero
Omar Alfonso Otero

being a quorum and all of the Directors of the corporation.

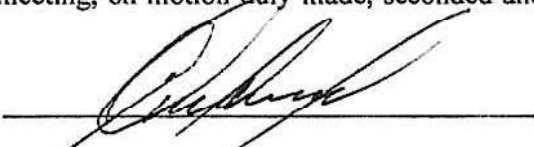
Omar G. Otero was nominated and elected Temporary Chairman and acted as such until relieved by the President. Omar G. Otero was nominated and elected Temporary Secretary, and acted as such until relieved by the Permanent Secretary.

The following were duly nominated and, a vote having been taken, were unanimously elected officers of the corporation to serve for a maximum period of one year or until their successors are elected and qualified:

President:	Omar G. Otero
Vice President:	Omar Alfonso Otero
Secretary:	Omar G. Otero

The President and Secretary thereupon assumed their respective offices in place and stead of the Temporary Chairman and the Temporary Secretary,

There being no further business before the meeting, on motion duly made, seconded and carried, the meeting was adjourned.



Omar G. Otero, Transferor



Omar Alfonso Otero, Transferee

Dated 1 January, 2023



[Department of State](#) / [Division of Corporations](#) / [Search Records](#) / [Search by Entity Name](#) /

Detail by Entity Name

Florida Profit Corporation

V.O.K. PROTECTIVE SERVICES, INC.

Filing Information

Document Number	P98000053158
FEI/EIN Number	65-0842791
Date Filed	06/15/1998
State	FL
Status	ACTIVE
Last Event	AMENDMENT
Event Date Filed	02/17/2023
Event Effective Date	NONE

Principal Address

7791 NW 46 ST SUITE 213
DORAL, FL 33166

Changed: 12/16/2022

Mailing Address

7791 NW 46 ST SUITE 213
DORAL, FL 33166

Changed: 12/16/2022

Registered Agent Name & Address

OTERO, OMAR G
7791 NW 46 ST SUITE 213
Doral, FL 33166

Name Changed: 02/06/2006

Address Changed: 01/23/2024

Officer/Director Detail

Name & Address

Title President

OTERO, OMAR Genitor
19727 NW 84TH PLACE
MIAMI, FL 33015

Title VP

Otero, Omar ALFONSO
5820 SW 115TH AVE
COOPER CITY, FL 33330

Annual Reports

Report Year	Filed Date
2022	01/05/2022
2023	01/24/2023
2024	01/23/2024

Document Images

01/23/2024 -- ANNUAL REPORT	View image in PDF format
02/17/2023 -- Amendment	View image in PDF format
01/24/2023 -- ANNUAL REPORT	View image in PDF format
01/05/2022 -- ANNUAL REPORT	View image in PDF format
01/04/2021 -- ANNUAL REPORT	View image in PDF format
01/10/2020 -- ANNUAL REPORT	View image in PDF format
03/13/2019 -- ANNUAL REPORT	View image in PDF format
02/09/2018 -- ANNUAL REPORT	View image in PDF format
04/07/2017 -- ANNUAL REPORT	View image in PDF format
03/07/2016 -- ANNUAL REPORT	View image in PDF format
01/28/2015 -- ANNUAL REPORT	View image in PDF format
01/13/2014 -- ANNUAL REPORT	View image in PDF format
10/14/2013 -- AMENDED ANNUAL REPORT	View image in PDF format
01/31/2013 -- ANNUAL REPORT	View image in PDF format
01/23/2012 -- ANNUAL REPORT	View image in PDF format
01/04/2011 -- ANNUAL REPORT	View image in PDF format
10/08/2010 -- REINSTATEMENT	View image in PDF format
05/01/2009 -- ANNUAL REPORT	View image in PDF format
01/08/2008 -- ANNUAL REPORT	View image in PDF format
01/23/2007 -- ANNUAL REPORT	View image in PDF format
02/06/2006 -- ANNUAL REPORT	View image in PDF format
02/02/2005 -- ANNUAL REPORT	View image in PDF format
01/12/2004 -- ANNUAL REPORT	View image in PDF format
01/13/2003 -- ANNUAL REPORT	View image in PDF format
02/12/2002 -- ANNUAL REPORT	View image in PDF format
03/06/2001 -- ANNUAL REPORT	View image in PDF format
07/17/2000 -- ANNUAL REPORT	View image in PDF format
03/04/1999 -- ANNUAL REPORT	View image in PDF format
06/15/1998 -- Domestic Profit	View image in PDF format

Florida Department of State, Division of Corporations



CERTIFICATE OF LIABILITY INSURANCE

EXHIBIT 1
Page 29 of 70

DATE (MM/DD/YYYY)
05/21/2024

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Eastern Insurance Group, Inc. 7400 SW 50th Terrace Suite 100 Miami FL 33155		CONTACT NAME: Amanda Noguez PHONE (A/C, No, Ext): (305) 595-3323 FAX (A/C, No): (305) 595-7135 E-MAIL ADDRESS: amanda.noguez@sigrisk.com	
INSURED V.O.K. Protective Services, Inc. 7791 NW 46 Street Suite 213 Doral FL 33166		INSURER(S) AFFORDING COVERAGE INSURER A: Arch Insurance Company INSURER B: Bridgefield Casualty Insurance INSURER C: INSURER D: INSURER E: INSURER F:	
		NAIC # 10335	

COVERAGES

CERTIFICATE NUMBER: Master 24-25

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	Y	BSPKG0375500	11/03/2023	11/03/2024	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000					
	MED EXP (Any one person) \$ 5,000					
	PERSONAL & ADV INJURY \$ 1,000,000					
GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:						GENERAL AGGREGATE \$ 3,000,000
						PRODUCTS - COM/PROP AGG \$ 3,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$
						BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE		BSFXS0087700	02/29/2024	11/03/2024	EACH OCCURRENCE \$ 2,000,000
	DED <input type="checkbox"/> RETENTION \$ <input type="checkbox"/>					AGGREGATE \$ 2,000,000
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	196-55267	05/21/2024	05/21/2025	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER
	E.L. EACH ACCIDENT \$ 1,000,000					
	E.L. DISEASE - EA EMPLOYEE \$ 1,000,000					
	E.L. DISEASE - POLICY LIMIT \$ 1,000,000					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

Certificate holder is listed as an additional insured with respect to General Liability. Coverage as additional insured is provided if required by written contract.

CERTIFICATE HOLDER

Broward County 1850 Eiler Dr. Fort Lauderdale FL 33316	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE
--	--



Irene Otero (VOK) <iotero@vokprotectiveservices.com>

RE: Confirmation of Bond - V.O.K. Protective Services, Inc. - Bond No. [REDACTED]

Linda Vera De Castro <linda@sbai.com>

Mon, Jul 15, 2024 at 10:28 AM

To: "Omar G. Otero (VOK)" <ootero@vokprotectiveservices.com>

Cc: "iotero@vokprotectiveservices.com" <iotero@vokprotectiveservices.com>

Hello Omar,

As per the Continuation Notice attached, the above referenced bond (# [REDACTED]) has been renewed as of 5/3/2024. The bond is a continuous bond and remains in effect until cancelled by the Surety Company (Lexon Insurance Company), therefore, no expiration date is available. If the obligee has any further questions, please have them provide in writing a list of questions with their contact information so that we may contact them directly.

NOTE: Our office now has payment by ACH available.

Thank you,

Linda Vera De Castro

Security Bond Associates, Inc.



Security Bond Associates, Inc.

10131 SW 40th Street

Miami, FL 33165

Phone: 305-552-5414

Fax: 305-226-7876

Email: linda@sbai.com

From: Omar G. Otero (VOK) <ootero@vokprotectiveservices.com>

Sent: Friday, July 12, 2024 9:35 AM

V.O.K. Protective Services, Inc.

Balance Sheet

As of July 1, 2024

	TOTAL
Equity	
31500 Reconciliation Adjustments	44,898.43
35251 Shareholder Distributions	
35255 Share Holders Distribution - Omar G Otero Equity - 60%	-364,255.93
35256 Share Holders Distribution - Omar A Otero Equity - 40%	-391,002.00
Total 35251 Shareholder Distributions	-755,257.93
35280 Opening Balance Equity	0.00
35600 Common Stock	1,000.00
39000 Retained Earnings	1,923,640.54
Net Income	286,039.98
Total Equity	\$1,500,321.02
TOTAL LIABILITIES AND EQUITY	\$1,508,882.33

BROWARD COUNTY LOCAL BUSINESS TAX RECEIPT

115 S. Andrews Ave., Rm. A-100, Ft. Lauderdale, FL 33301-1895 – 954-357-4829

VALID OCTOBER 1, 2024 THROUGH SEPTEMBER 30, 2025

Business Name: V O K PROTECTIVE SERVICES INC

Receipt #: 329-263120
Business Type: ALL OTHERS (SECURITY AGENCY)

Owner Name: V O K PROTECTIVE SERVICES INC

Business Opened: 06/30/2014

Business Location: 7791 NW 46TH ST STE 213
MIAMI DADE COUNTY

State/County/Cert/Reg: B2700047

Exemption Code:

Business Phone: 305-216-4848

Rooms

Seats

Employees

6

Machines

Professionals

For Vending Business Only						
Number of Machines:				Vending Type:		
Tax Amount	Transfer Fee	NSF Fee	Penalty	Prior Years	Collection Cost	Total Paid
81.00	0.00	0.00	0.00	0.00	0.00	81.00

Receipt Fee 81.00

Packing/Processing/Canning Employees 0.00

THIS RECEIPT MUST BE POSTED CONSPICUOUSLY IN YOUR PLACE OF BUSINESS

THIS BECOMES A TAX RECEIPT

WHEN VALIDATED

This tax is levied for the privilege of doing business within Broward County and is non-regulatory in nature. You must meet all County and/or Municipality planning and zoning requirements. This Business Tax Receipt must be transferred when the business is sold, business name has changed or you have moved the business location. This receipt does not indicate that the business is legal or that it is in compliance with State or local laws and regulations.

Mailing Address:

V O K PROTECTIVE SERVICES INC
7791 NW 46TH ST STE 213
DORAL, FL 33166-5482

Receipt # 039-23-00001460
Paid 07/18/2024 81.00

2024 - 2025

FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES

WILTON SIMPSON
COMMISSIONER

DIVISION OF LICENSING

02/03/23
DATE ISSUED

05/14/25
DATE OF EXPIRATION

B 2700047
LICENSE NUMBER

V.O.K. PROTECTIVE SERVICES, INC.

7791 NW 46TH ST,
STE 213
DORAL, FL 33166

OTERO, OMAR G, PRESIDENT
OTERO, VALERIE X., VICE PRESIDENT

THE *SECURITY AGENCY* NAMED ABOVE IS LICENSED AND REGULATED UNDER THE PROVISIONS OF
CHAPTER 493, FLORIDA STATUTES.



A handwritten signature in black ink, appearing to read "Wilton Simpson", is located in the bottom right corner.

WILTON SIMPSON
COMMISSIONER

SECURITY/INVESTIGATIVE AGENCY MGR
STATE OF FLORIDA



LICENSE NUMBER
M 1400041

OTERO, OMAR G

BIRTH DATE	SEX	RACE
07/22/1962	M	W

EXPIRES
01/29/2025

The above named individual is licensed by the Department of Agriculture and Consumer Services, Division of Licensing in accordance with Chapter 491, Florida Statutes.


NICOLE "NIKKI" FRIED
COMMISSIONER

V.O.K. PROTECTIVE SERVICES, INC.
SAFETY PLAN



TABLE OF CONTENTS

<u>1</u>	<u>SAFETY COMMITTEE</u>	<u>4</u>
1.1	SAFETY COORDINATOR	4
1.2	RESPONSIBILITIES	4
<u>2</u>	<u>SAFETY AND HEALTH TRAINING</u>	<u>4</u>
2.1	SAFETY AND HEALTH ORIENTATION	4
2.2	JOB-SPECIFIC TRAINING	4
2.3	PERIODIC RETRAINING OF EMPLOYEES	5
<u>3</u>	<u>SAFETY INSPECTIONS</u>	<u>5</u>
<u>4</u>	<u>FIRST-AID PROCEDURES</u>	<u>6</u>
4.1	MINOR FIRST-AID TREATMENT	6
4.2	NONEMERGENCY MEDICAL TREATMENT	6
4.3	EMERGENCY MEDICAL TREATMENT	6
4.4	FIRST-AID TRAINING	6
4.5	FIRST-AID INSTRUCTIONS	7
<u>5</u>	<u>ACCIDENT INVESTIGATION</u>	<u>8</u>
5.1	ACCIDENT INVESTIGATION PROCEDURES	8
5.2	ACCIDENT INVESTIGATION REPORT	9
5.3	INSTRUCTIONS FOR COMPLETING THE ACCIDENT INVESTIGATION REPORT	10
<u>6</u>	<u>RECORDKEEPING PROCEDURES</u>	<u>11</u>
<u>7</u>	<u>SAFETY RULES, POLICIES AND PROCEDURES</u>	<u>12</u>
7.1	ALL EMPLOYEES	13
7.2	ALL EMPLOYEES	14
7.3	OFFICE PERSONNEL	15

V.O.K. PROTECTIVE SERVICES, INC.
SAFETY POLICIES AND PROCEDURES MANUAL

Signature of CEO/President

Date

1 SAFETY COMMITTEE

1.1 SAFETY COORDINATOR

A safety coordinator has been appointed to recommend improvements to our workplace safety program and to identify corrective measures needed to eliminate or control recognized safety and health hazards. The safety coordinator is the president of our organization.

1.2 RESPONSIBILITIES

The safety coordinator determines the schedule for evaluating the effectiveness of control measures used to protect employees from safety and health hazards in the workplace.

The safety coordinator is responsible for assisting in reviewing and updating workplace safety rules based on accident investigation findings, any inspection findings, and employee reports of unsafe conditions or work practices; and accepting and addressing anonymous complaints and suggestions from employees.

The safety coordinator is responsible for assisting in updating the workplace safety program by evaluating employee injury and accident records, identifying trends and patterns, and formulating corrective measures to prevent recurrence.

The safety coordinator is responsible for promoting safety and health awareness and co-worker participation through continuous improvements to the workplace safety program.

The safety coordinator participates in safety training is responsible for assisting in monitoring workplace safety education and training to ensure that it is in place, that it is effective, and that it is documented.

2 SAFETY AND HEALTH TRAINING

2.1 SAFETY AND HEALTH ORIENTATION

Workplace safety and health orientation begins on the first day of initial employment. Each employee has access to a copy of this safety manual, through his or her supervisor, for review and future reference, and each employee will be given a personal copy of the safety rules, policies and procedures pertaining to his or her job. Supervisors will ask questions of employees and answer employees' questions to ensure knowledge and understanding of safety rules, policies and job-specific procedures described in our workplace safety program manual.

All employees will be instructed by their supervisors that compliance with the safety rules described in the workplace safety manual is required.

2.2 JOB-SPECIFIC TRAINING

- Supervisors will initially train employees on how to perform assigned job tasks safely.
- Supervisors will carefully review with each employee the specific safety rules, policies and procedures that are applicable and that are described in the workplace safety manual.
- Supervisors will give employees verbal instructions and specific directions on how to do the work safely.
- Supervisors will observe employees performing the work. If necessary, the supervisor will provide a

demonstration using safe work practices or remedial instruction to correct training deficiencies before an employee is permitted to do the work without supervision.

- Supervisors will review safe work practices with employees before permitting the performance of new, nonroutine or specialized procedures.

2.3 PERIODIC RETRAINING OF EMPLOYEES

All employees will be retrained periodically on safety rules, policies and procedures, and when changes are made to the workplace safety manual.

Individual employees will be retrained after the occurrence of a work-related injury caused by an unsafe act or work practice, and when a supervisor observes employees displaying unsafe acts, practices or behaviors.

3 SAFETY INSPECTIONS

It is up to all employees to maintain safe working conditions.

Checklists for safety inspections ensure that important items are not overlooked. Inspections identify areas of risk. (accident and/or injury)

Supervisors continually monitor work areas.

Supervisors make periodic inspections, announced and unannounced.

The following is a generic checklist.

Doors	Personnel Training
Windows	Stairs
Walking – Working Surfaces	Personal Protective Equipment
Lighting	Flammable & Combustible Materials
Fire Hazards	Hand and Portable Powered Tools
Electrical Boxes	Lockout/Tagout Procedures
Flammable Liquids	Confined Spaces
Emergency Exits:	Hazard Communication
Marked Properly	Electrical
Unobstructed	Building and Grounds Conditions
First Aid Kits, Supplies	Housekeeping Program
Fire Extinguishers	Heating and Ventilation
Accessible	Required OSHA Recordkeeping
Charged	Safety & Health Programs
Required Posters	

4 FIRST-AID PROCEDURES

4.1 MINOR FIRST-AID TREATMENT

If you sustain an injury or are involved in an accident requiring minor first-aid treatment:

- Inform your supervisor.
- Administer first-aid treatment to the injury or wound.
- If a first-aid kit is used, indicate usage on the accident investigation report.
- Access to a first-aid kit is not intended to be a substitute for medical attention.
- Provide details for the completion of the accident investigation report.

4.2 NONEMERGENCY MEDICAL TREATMENT

For nonemergency work-related injuries requiring professional medical assistance, management must first authorize treatment. If you sustain an injury requiring treatment other than first aid:

- Inform your supervisor.
- Proceed to the posted medical facility. Your supervisor will assist with transportation, if necessary.
- Provide details for the completion of the accident investigation report.

4.3 EMERGENCY MEDICAL TREATMENT

If you sustain a severe injury requiring emergency treatment:

- Call for help and seek assistance from a co-worker.
- Use the emergency telephone numbers and instructions posted on the first-aid kit to request assistance and transportation to the local hospital emergency room.
- Provide details for the completion of the accident investigation report.

4.4 FIRST-AID TRAINING

Each employee will receive training and instructions from his or her supervisor regarding our first-aid procedures.

4.5 FIRST-AID INSTRUCTIONS

In all cases requiring emergency medical treatment, immediately call or have a co-worker call to request emergency medical assistance. Use required bloodborne pathogen procedures while administering first aid.

Wounds:

Minor: *Cuts, lacerations, abrasions or punctures*

- Wash the wound using soap and water; rinse it well.
- Cover the wound using a clean dressing.

Major: *Large, deep and bleeding wounds*

- Stop the bleeding by pressing directly on the wound, using a bandage or cloth.
- Keep pressure on the wound until medical help arrives.

Broken Bones:

- Do not move the victim unless it is absolutely necessary.
- If the victim must be moved, "splint" the injured area. Use a board, cardboard or rolled newspaper as a splint.

Burns:

Thermal (Heat)

- Rinse the burned area without scrubbing it, and immerse it in cold water.
Do not use ice water.
- Blot dry the area and cover it using sterile gauze or a clean cloth.

Chemical

- Immediately flush the exposed area with cool water for 15 to 20 minutes.

Eye Injury:

Small particles

- Do not rub your eyes.
- Use the corner of a soft clean cloth to draw particles out, or hold the eyelids open and flush the eyes continuously with water.

Large or stuck particles

- If a particle is stuck in the eye, do not attempt to remove it.
- Cover both eyes with a bandage.

Chemical

- Immediately irrigate the eyes and under the eyelids with water for 30 minutes.

Neck or Spine Injury:

- If the victim appears to have injured his or her neck or spine, or is unable to move his or her arm or leg, do not attempt to move the victim unless it is absolutely necessary.

Heat Exhaustion:

- Loosen the victim's tight clothing.
- Give the victim *sips* of cool water.
- Make the victim lie down in a cooler place with the feet raised.

5 ACCIDENT INVESTIGATION

5.1 ACCIDENT INVESTIGATION PROCEDURES

An accident investigation will be performed by the supervisor at the location where the accident occurred. The safety coordinator is responsible for seeing that the accident investigation reports are being filled out completely and that the recommendations are being addressed. Supervisors will investigate all accidents, injuries and occupational diseases using the following investigation procedures:

- Implement temporary control measures to prevent any further injuries to employees.
- Review the equipment, operations and processes to gain an understanding of the accident situation.
- Identify and interview each witness and any other person who might provide clues to the accident's causes.
- Investigate causal conditions and unsafe acts; make conclusions based on existing facts.
- Complete the accident investigation report.
- Provide recommendations for corrective actions.
- Indicate the need for additional or remedial safety training.

Accident investigation reports must be submitted to the safety coordinator within 24 hours of the accident.

5.2 ACCIDENT INVESTIGATION REPORT

Report No.: _____

Company: _____

Address: _____

1. Name of injured: _____ S.S. No.: _____
2. Sex: ☐ M ☐ F Age: _____ Date of accident: _____
3. Time of accident: _____ a.m. _____ p.m. Day of accident: _____
4. Employee's job title: _____
5. Length of experience on job: _____ years: _____ months
6. Address of location where the accident occurred: _____
7. Nature of injury, injury type, and part of the body affected: _____
8. Describe the accident and how it occurred: _____
9. Cause of the accident: _____
10. Was personal protective equipment required? ☐ yes ☐ no
Was it provided? ☐ yes ☐ no
Was it being used? ☐ yes ☐ no
If "no," explain: _____
Was it being used as trained by supervisor or designated trainer? ☐ yes ☐ no
If "no," explain: _____
11. Witness(es): _____
12. Was safety training provided to the injured? ☐ yes ☐ no
If "no," explain: _____
13. Interim corrective actions taken to prevent recurrence: _____
14. Permanent corrective action recommended to prevent recurrence: _____
15. Date of report: _____ , _____ 20_____
Prepared by: _____

Supervisor (Signature): _____

Date: _____

16. Status and follow-up action taken by safety coordinator: _____

Safety Coordinator (Signature) _____

Date _____

5.3 INSTRUCTIONS FOR COMPLETING THE ACCIDENT INVESTIGATION REPORT

An accident investigation is not designed to find fault or place blame, but it is an analysis of the accident to determine causes that can be controlled or eliminated.

(Items 1-6) Identification: This section is self-explanatory.

(Item 7) Nature of Injury: Describe the injury, e.g., strain, sprain, cut, burn, fracture.

Injury Type: First aid—injury resulted in minor injury/treated on premises; Medical—injury treated off premises by physician; Lost time—injured missed more than one day of work; No Injury—no injury, near-miss type of incident.

Part of the Body: Part of the body directly affected, e.g., foot, arm, hand, head.

(Item 8) Describe the accident: Describe the accident, including exactly what happened, and where and how it happened. Describe the equipment or materials involved.

(Item 9) Cause of the accident: Describe all conditions or acts which contributed to the accident, e.g.—

- a. unsafe conditions (spills, grease on the floor, poor housekeeping or other physical conditions).
- b. unsafe acts (unsafe work practices such as failure to warn, failure to use required personal protective equipment).

(Item 10) Personal protective equipment: This section is self-explanatory.

(Item 11) Witness(es): List name(s), address(es), and phone number(s).

(Item 12) Safety training provided: Was any safety training provided to the injured relating to the work activity being performed?

(Item 13) Interim corrective action: Measures taken by supervisor to prevent recurrence of incident, e.g., barricading accident area, posting warning signs, shutting down operations.

(Item 14): This section is self-explanatory.

(Item 15): This section is self-explanatory.

(Item 16) Follow-up: Once the investigation is complete, the safety coordinator shall review and follow up the investigation to ensure that corrective actions recommended by the safety committee and approved by the employer are taken and that control measures have been implemented.

6 RECORDKEEPING PROCEDURES

The safety coordinator will control and maintain all employee accident and injury records. Records are maintained for a minimum of five (5) years and include:

- Accident Investigation Reports, see Section 7, page 17
- Workers' Compensation First Report of Injury or Illness
- Log and Summary of Occupational Injuries and Illnesses as required by OSHA's Recordkeeping Regulation, 29 CFR 1904.2:
 - OSHA Form 300 (Rev. 1-2004): Log of Work Related Injuries and Illnesses
 - OSHA Form 300A (Rev. 1-2004): Summary of Work Related Injuries and Illnesses
 - OSHA Form 301: Injury and Illness Incident Report

7 SAFETY RULES, POLICIES AND PROCEDURES

The safety rules contained on these pages have been prepared to protect you in your daily work. Employees are to follow these rules, review them often and use good common sense in carrying out assigned duties.

These safety rules shall include both general workplace safety rules and job-specific safety rules.

General Rules:

All Employees

7.1 ALL EMPLOYEES

7.1.1 HOUSEKEEPING

1. Use caution signs/cones to barricade slippery areas.
2. Do not store or leave items on stairways.
3. Return tools to their storage places after using them.
4. Do not block or obstruct stairwells, exits or accesses to safety and emergency equipment such as fire extinguishers or fire alarms.
5. Do not place materials such as boxes or trash in walkways and passageways.
6. Do not use gasoline for cleaning purposes.
7. Mop up water around water fountains, drink machines and ice machines.

7.1.2 LIFTING PROCEDURES

General

1. Test the weight of the load before lifting by pushing the load along its resting surface.
2. If the load is too heavy or bulky, use lifting and carrying aids such as hand trucks, dollies, pallet jacks and carts, or get assistance from a co-worker.
3. Never lift anything if your hands are greasy or wet.
4. Wear protective gloves when lifting objects with sharp corners or jagged edges.

7.1.3 WHEN LIFTING—

1. Face the load.
2. Position your feet 6"-12" apart with one foot slightly in front of the other.
3. Bend at the knees, not at the back.
4. Keep your back straight.
5. Get a firm grip on the object using your hands and fingers. Use handles when they are present.
6. Hold the object as close to your body as possible.
7. Perform lifting movements smoothly and gradually; do not jerk the load.
8. If you must change direction while lifting or carrying the load, pivot your feet and turn your entire body. Do not twist at the waist.
9. Set down objects in the same manner as you picked them up, except in reverse.
10. Do not lift an object from the floor to a level above your waist in one motion. Set the load down on a table or bench and then adjust your grip before lifting it higher.

7.2 ALL EMPLOYEES

7.2.1 LADDERS AND STEPLADDERS

1. Read and follow the manufacturer's instruction label affixed to the ladder if you are unsure how to use the ladder.
2. Do not use ladders that have loose rungs, cracked or split side rails, missing rubber foot pads, or other visible damage.
3. Keep ladder rungs clean and free of grease. Remove buildup of material such as dirt or mud.
4. When performing work from a ladder, face the ladder and do not lean backward or sideways from the ladder.
5. Allow only one person on the ladder at a time.
6. Do not stand on the top two rungs of any ladder.
7. Do not stand on a ladder that wobbles or leans to the left or right of center or is crooked.
8. Do not try to "walk" a ladder by rocking it. Climb down the ladder and then move it.

7.2.2 CLIMBING A LADDER

1. Face the ladder when climbing up or down it.
2. Do not carry items in your hands while climbing up or down a ladder.
3. Maintain a three-point contact by keeping both hands and one foot or both feet and one hand on the ladder at all times when climbing up or down the ladder.

7.2.3 DRIVING/VEHICLE SAFETY

Fueling Vehicles

1. Turn the vehicle off before fueling.
2. Do not smoke while fueling a vehicle.
3. Wash hands with soap and water if you spill gasoline on them.

Driving Rules

1. Shut all doors and fasten your seat belt before moving the vehicle.
2. Obey traffic patterns and signs at all times.
3. Maintain a three-point contact using both hands and one foot or both feet and one hand when climbing into and out of vehicles.
4. Do not leave keys in an unattended vehicle.

7.3 OFFICE PERSONNEL

7.3.1 OFFICE SAFETY

General

1. Do not place material such as boxes or trash in walkways and passageways.
2. Do not throw matches, cigarettes or other smoking materials into trash baskets.
3. Do not kick objects out of your pathway; pick them up or push them out of the way.
4. Keep floors clear of items such as paper clips, pencils, tacks or staples.
5. Straighten or remove rugs and mats that do not lie flat on the floor.
6. Mop up water around water fountains and drink machines.
7. Do not block your view by carrying large or bulky items; use a dolly or hand truck or get assistance from a fellow employee.
8. Store sharp objects, such as pens, pencils, letter openers or scissors, in drawers or with the points down in a container.
9. Carry pencils, scissors and other sharp objects with the tips pointing down.
10. Use the ladder or step stool to retrieve or store items that are located above your head.
11. Do not run on stairs or take more than one step at a time.
12. Keep doors in hallways fully open or fully closed.
13. Use handrails when ascending or descending stairs or ramps.
14. Obey all posted safety and danger signs.

7.3.2 FURNITURE USE

1. Open only one file cabinet drawer at a time. Close the filing cabinet drawer you were working in before opening another filing drawer in the same cabinet.
2. Use the handle when closing doors, drawers and files.
3. Put heavy files in the bottom drawers of file cabinets.
4. Do not tilt your chair on its back two legs while you are sitting in it.
5. Do not stand on furniture to reach high places.

7.3.3 EQUIPMENT USE

1. Do not use fans that have excessive vibration, frayed cords or missing guards.
2. Do not place floor-type fans in walkways, aisles or doorways.
3. Do not plug multiple electrical cords into a single outlet.
4. Do not use extension or power cords that have the ground prong removed or broken off.
5. Do not use frayed, cut or cracked electrical cords.
6. Use a cord cover or tape down cords when running them across aisles, between desks or across entrances or exits.
7. Turn the power switch of the local exhaust fans to "ON" when operating the blueprint machine.
8. Do not use lighting fluid to clean drafting equipment; use soap and water.

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Substance abuse company policy

Policy brief & purpose

We will establish safeguards against drug and alcohol abuse to ensure a safe and healthy working environment. Substance abuse imposes a burden on those caught up in the abuse, but also on their co-workers. It may lead to poorer job performance and accident risks.

To mitigate these risks, we have developed this substance abuse policy to prohibit the use, possession or sale of drugs on company premises and strictly regulate the consumption of alcohol.

Scope

All job applicants, employees, contractors and part-time employees should abide by the provisions of this policy.

Policy elements

Illegal drugs, inhalants and prescription as well as over-the-counter drugs fall into the "substances" category. We will also place restrictions on alcohol consumption.

While working, you must not:

- Possess, use or be under the influence of alcohol, inhalants or drugs. You can consume alcohol in moderation while in approved business meetings or social gatherings.

- Sell, buy, transfer or distribute drugs or drug paraphernalia.

- Use prescription drugs (e.g. medical marijuana) while working or being on company premises.

To prevent accidents and productivity losses, we implemented drug and alcohol tests for employees/candidates when:

1. We have made a formal job offer to the final candidate or when we are about to promote a current employee.
2. The circumstances surrounding a workplace accident are unclear and we want to ensure there was no substance abuse involved.
3. We test employees randomly (we will only use this practice if it's legal under state or national law.)

Especially if you are doing a safety-sensitive job (e.g. machine operator), we reserve the right to withdraw our job offer, alter your job duties or send you home for the day if you're under the influence of drugs (e.g. muscle relaxants.) We may also terminate you if your actions create safety risks. We will determine the best disciplinary action on a case-by-case basis.

Depending on the law, you may still clear a random drug test if you test positive for prescription drugs (e.g. medical marijuana.) If your job is safety-sensitive though, you must show that you can perform your duties without problems. Your supervisor will be responsible for spotting and reporting any impairment resulting from drug use.

Disciplinary Consequences

We may invoke disciplinary action up to termination, when you:

Test positive for hard drugs (e.g. cocaine.)

Sell, or attempt to sell, any form of substance.

Use any kind of drug on company premises.

Refuse to take company mandated drug test.

Managers will decide on the appropriate disciplinary action depending on the circumstances.

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V.O.K. CURRICULUM

COURSE A - 24 HOURS

The curriculum employed by our Security School is intended to emphasize professional behavior, norms of conduct, and above all, develop the necessary discretion to recognize that private security is a profession. Those engaging in said profession should have the ability to understand that it is a regulated industry and there are regulations that the professional security guard must abide to.

Chapter 493, F.S. and chapter 5N-1, F.A.C

The following are some of the blocks dictated at our school:

INTRODUCTION TO SECURITY CH. 493

2.0 Hours

This training session is dictated to inspire motivation and dedication for applicants as well as for seasoned officers in the profession. It highlights most issues that confront security officers every day. The main objective of this block is to decrease turnover and create a mindset that will produce a better officer and subsequently, a better employee. The following is a list of some topics covered on this block:

UNDERSTANDING OF THE CHAPTER THAT GOVERNS THE PROFESSION

- How to act as a deterrent while patrolling
- What a security purpose is
- How to reduce Liability
- Legal authority limitations
- Courtesy and honesty

LEGAL ISSUES: LIABILITY

2.5 Hours

The purpose of this block is to make the security officer aware and recognize situations that are a potential criminal or safety hazard. It helps management determine if someone could be potentially dangerous.

The following is a partial list of topics covered:

THE IMPORTANCE OF AVOIDING LIABILITY AND LEGAL CONFLICTS

- The importance of remaining alert
- Never confront a hostile person alone
- Communications guidelines
- How to approach a group of disorderly persons

BASIC EMERGENCY FIRST AID

2.0 Hours

Course Objective

Recognizing and identifying various forms of illness and injuries commonly associated with emergency situations. This block will also teach the security officer how to proceed in emergency situations that involve injuries

Demonstrating how to select appropriate emergency treatment for injuries and wound commonly observed by law enforcement personnel.

Grasping the manual skills and dexterity needed to reduce the loss of blood, dress wound, splint fractures, and immobilize limbs as needed.

Gaining the skills and expertise needed to identify the need form and to apply cardio pulmonary resuscitation.

Gaining the skills and knowledge to remove injured persons from hazardous locations and safely transport them to medical facilities.

Defining and discussing the legal aspects of rendering emergency first aid

Being able to control severe bleeding through approved methods and technique

EMERGENCY PROCEDURES

1.5 Hours

This training session is given to let the security officers have a better understanding regarding what to do in the event a major crisis occurs on their watch. It covers some major crisis situations, from active mass shooting situations to people trapped in an elevator.

Its primary purpose is to show security officers what actions to take for their own personal safety as well as what procedure to take to assist others from getting out of harm's way. Some of the topics are:

- Active shooter
- Explosions
- Evacuations
- Earthquakes tornados
- Elevator emergencies
- Workplace violence
- Bomb threat
- Fire alarms
- Crime in progress
- Suspicious packages
- Hostage situations and more.
- Defining and discussing the legal aspects of rendering emergency first aid

CONFLICT RESOLUTION

Conflict resolution is paramount in the security officer training because it gives the officer an advantage when faced with argumentative individuals. It highlights the importance that security officers must maintain their decorum at all times regardless of the hostility they might be presented with. This training session emphasizes the importance regarding why a security officer should always remain polite, respectful and sensitive to the persons being served. This will in turn, build a positive relationship with the clients and the general public as a whole. Furthermore, it even impresses the importance of maintaining positive facial expressions and tone of voice. This instructs the security officer how no to appear as a threat but to always show the other person that they are concerned.

This training session covers the following topics:

- Persuasion Skills
- Verbal Skills
- Dealing with hostile persons
- Controlling your emotions
- How to escort a hostile person off the post
- Reading body language and more

ETHICS AND PROFESSIONAL CONDUCT

2.0 Hours

Developing and maintaining a good relationship with the client should be paramount. This session highlights the importance of hiring security officers who will be able to treat the client and the public with respect and have good behavioral skills.

The following subjects are covered:

- The purpose of customer relations
- Why customer relation is important
- Customer needs
- Customer policies
- Customer relations procedures
- Non-aggressive technics

ACCESSS CONTROL

1.0 Hours

Officers will learn how to proceed in controlling access to sensitive, restricted areas.

Officers will learn the importance of how to maintain a log and monitor access area.

How to approach a vehicle

PATROL TECNQUES

1.5 Hours

Patrol techniques will be taught to the security guards making emphasis on their safety the best approach to be effective

OBSERVATION TECHNICS AND REPORT WRITING

3.0 HOURS

Report writing is an essential responsibility for security officers. It is also the most difficult.

To ease this difficulty, we at our training facility, will instruct and guide the potential security officer to understand the purpose of report writing with visual actions that will be highlighted as the instructor teaches. These employed

techniques will be reinforced using videos that focus on the simple steps needed to write clear and straightforward reports. It gives the security officer the guidelines to reduce entering repetitive information.

At the end of the session, preformatted templates will be given to the student to test their knowledge and understanding of the subject. The following is a partial list of topics covered on this section:

- Note taking
- Daily Logs
- The purpose of report writing
- Accountability in reports
- Report reduce liability
- Setting up and using a notebook
- Reports and litigation reports malfunctions
- Understanding military times
- Reporting defective company equipment
- The chain of custody
- Using reports to testify
- The who, what, why, of report writing
- Reading a report
- Keeping reports short, concise, complete and clear
- Analyzing a report
- Report composure
- Straightforward reports
- Report requirements
- Incident reports

INTERVIEWING TECHNIQUES

1.0 Hours

This block will summarize to the officer the importance of a good interview.

How to communicate clearly, concisely, and effectively

Using clear basic terminology

The officer will learn art of interviewing elderly individuals and minors.

Note taking

FIRE DETECTION, SUPPRESSION AND LIFE SAFETY

1.5 Hours

How to proceed in case of fire

Who to call in case of fire

Approaching a door before entering in case of fire

An effective security officer should know how to evacuate in case of fire

CRIME AND ACCIDENT PREVENTION TECHNIQUES AND PRACTICES

2.0 Hours

On this lesson, the officer will be instructed in how to prevent crime

The best approach to a crime in progress

Cooperation with authorities

Documentation and record keeping of a crime

How and when to report hazards

CRIME AND ACCIDENT SCENE PROTECTION

1.0 Hours

This training session is given to let the security officers have a better understanding regarding what to do in the event a major crisis occurs on their watch. It covers some major crisis situations, from active mass shooting situations to people trapped in an elevator.

Its primary purpose is to show security officers what actions to take for their own personal safety as well as what procedure to take to assist others from getting out of harm's way. Some of the topics are:

- Active shooter
- Fires.
- Protecting a crime scene
- Evidence preservation
- Reporting the findings at the scene

TERRORISM AWARENESS

2.0 Hours

This training session illustrates and instructs the security officers the basic responsibilities needed to prevent and/or reduce a terrorist attack at their post. Although it does not cover every aspects of combating terrorism, it gives them a basic understanding and overview of situations profiles. The session shows the security officer how to react to suspected terrorism situations such as:

- Assisting law enforcement
- Recognizing something suspicious
- Understanding the different types of terrorism
- What are incendiary devices
- How to handle a bomb threat
- Terrorist situations profiles
- Warning signs
- Suspicious Mail
- Booby traps
- Warning signs for biochemical attacks
- Secondary devises
- Suicide bombers
- Implementing self-protective measurements
- Pipe bombs
- Satchel bombs
- Evacuation procedures

EXAMINATION

1.0 Hours

TOTAL 24 HOURS

COURSE B - 16 HOURS

PUBLIC RELATIONS

1.0 Hours

This training session emphasizes the importance regarding why a security officer should always remain polite, respectful and sensitive to the persons being served. This will in turn, build a positive relationship with the clients and the general public as a whole. Furthermore, it even impresses the importance of maintaining positive facial expressions and tone of voice. This instructs the security officer how not to appear as a threat but to always show the other person that they are concerned.

COURTROOM PROCEDURES

1.0 Hours

This training block explains how the court system works. It demonstrates how security officers should conduct themselves in court. It demonstrates the correct way to testify and make a professional and positive impression to the Judge and jury.

- The laws that govern courtroom procedures
- The various Court levels (State & Federal)
- How to respond to questions
- Projecting a good impression when testifying
- Do's & Don'ts while in Court
- Correct Demeanor while in Court
- Basic Courtroom Rules
- Pretrial procedures

FUNDAMENTALS OF PERSONAL SECURITY

2.0 Hours

The purpose of this block is to make the security officer aware and recognize situations that are a potential criminal or safety hazard. It helps management determine if someone could be potentially dangerous.

The following is a partial list of topics covered:

- The importance of remaining alert

- Flashlight techniques
- How to walk silently
- Never confront a hostile person alone

INTERPERSONAL COMMUNICATIONS

2.0 Hours

With this training session, the security officer should be able to detect hostile situations, aggressive individual and employ his training to divert a potentially dangerous situation. Being able to communicate in writing and verbally in a professional manner, the security officer should be able to exercise control of an aggressive situation

PROFESSIONAL COMMUNICATION

0.5 Hours

This instruction section will cover the proper use of communication devices such as Radios, cellular communications and other devices.

TRAFFIC DIRECTION AND CONTROL

1.0 Hours

This section explains and demonstrates hand signal techniques to smoothly move and manage traffic. It emphasizes safety concerns for pedestrian, vehicles and the security officer.

- Traffic control objectives
- Proper hand signals
- Traffic wands
- Maintaining high visibility
- Safety techniques
- Pedestrian control
- Parking management
- Controlling 4-way intersections

CROWD CONTROL

1.0 Hours

Security officers will be offered a basic orientation for the management of crowd control by maintaining their decorum, common sense, discretion and coherence when confronting a crowd; whether it a peaceful or hostile situation. The security crowd control will enhance the need to exercise the following:

- Persuasion skills
- Verbal skills
- Controlling your emotions
- How to escort a hostile person
- Reading body language

SPECIAL PROBLEMS FOR SECURITY

4.0 Hours

This training session highlights and explains the rationale of most issues that confront guard services every day. Its main objective is to decrease trouble and create a mindset the will produce safer results.

- Why security officers are necessary
- How security officers fit into the company profile
- How to act as a deterrent
- What a security purpose is
- What a customer's assets are and why is it necessary to protect them
- How to reduce liability
- The various security functions they might be assigned to such as foot patrol, mobile patrol desk duty, gate control etc.
- Legal authority limits
- Difference between felonies and misdemeanors
- How to maintain a good attitude

TERRORISM AWARENESS

2.5 Hours

This training session illustrates and instructs the security officers the basic responsibilities needed to prevent and/or reduce a terrorist attack at their post. Although it does not cover every aspects of combating terrorism, it gives them a basic understanding and overview of situations profiles. The session shows the security officer how to react to suspected terrorism situations such as:

- Assisting law enforcement

- Recognizing something suspicious
- Understanding the different types of terrorism
- What are incendiary devices
- How to handle a bomb threat
- Terrorist situations profiles
- Warning signs
- Suspicious Mail
- Booby traps
- Warning signs for biochemical attacks
- Secondary devices
- Suicide bombers
- Implementing self-protective measurements
- Pipe bombs
- Satchel bombs
- Evacuation procedures

EXAMINATION

1.0 Hours

TOTAL 16 HOURS

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Facility Name = V.O.K. Protective Services, Inc.

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For additional information, select the hyperlinks under "Data Links" where available.

D - Provides a list of electronic documents associated with the facility.

F - Provides a facility summary report.

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M - Provides a GIS map focused on the facility.

Q - Provides a contact for user questions and quality control.

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On April 12, 2022, in Miami, a nonunion safety case was opened. V.O.K Protective Services, Inc. explained that the incident occurred due to the negligence of the client's employee, and no fines were issued. The case was close on 09/21/2023.

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Establishment Search Results

Establishment	Inspection Date Range	OSHA Office	Site Zip Code	State
V.O.K. Protective Services Inc.	07/10/2019 to 07/10/2024	all	all	all

▲ Note: *Inspections which are known to be incomplete will have the identifying Activity Nr shown in italic. Information for these open cases is especially dynamic, e.g., violations may be added or deleted.*

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	#	Activity	Date Opened	RID	ST	Type	Scope	SIC	NAICS	Violations	Establishment Name
<input type="checkbox"/>	1	1589866.015	04/12/2022	0418800	FL	Referral	Partial		424820		V.O.K. Protective Services, Inc

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Inspection Detail

Case Status: CLOSED

Inspection: 1589866.015 – V.O.K. Protective Services, Inc

Inspection Information - Office: Ft. Lauderdale

Inspection Nr: 1589866.015

Report ID: 0418800

Date Opened: 04/12/2022

Site Address:

V.O.K. Protective Services, Inc
13690 Nw 14th St
Miami, FL 33182

Union Status: NonUnion

SIC:

NAICS: 424820/Wine and Distilled
Alcoholic Beverage Merchant
Wholesalers

Mailing Address:

2550 Nw 72nd Avenue, Suite 315,
Miami, FL 33122

Inspection Type: Referral

Safety/Health: Safety

Scope: Partial

Close Conference: 04/13/2022

Advanced Notice: N

Emphasis:

Ownership: Private

Case Closed: 09/21/2023

Related Activity

Type	Activity Nr	Safety	Health
------	-------------	--------	--------

Inspection	1589860	Yes	EXHIBIT 1 Page 68 of 70
Referral	1881815	Yes	

Case Status: CLOSED

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Tel 305-216-4848 Fax 786-542-8449
ootero@vokprotectiveservices.com
www.vokprotectiveservices.com



V.O.K. Protective Services, Inc. is committed to environmental protection, maintenance, and enhancement at the Port of Port Everglades. As a responsible security provider with extensive experience in maritime security, we understand the critical importance of safeguarding the port's environment. Our operations at Port Everglades are guided by strict adherence to environmental regulations and best practices, ensuring that our activities do not compromise the local ecosystem.

We actively participate in environmental stewardship by incorporating eco-friendly practices in our security operations, such as minimizing waste, reducing carbon footprints, and promoting the sustainable use of resources. Our personnel are trained to recognize and mitigate environmental risks, contributing to the protection and preservation of the port's natural resources.

Through our commitment to environmental excellence, V.O.K. Protective Services aims to support the long-term sustainability of Port Everglades, ensuring that it remains a safe and thriving hub for commerce while maintaining its ecological integrity.