## 2004 FOR PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# P02000076092

Entity Name: THEMIS SECURITY GROUP, INC.

FILED Apr 23, 2004 Secretary of State

Current Principal Place of Business:			New Princ	New Principal Place of Business:		
551 NW 77 SUITE 114 BOCA RAT	STREET ON, FL 33487					
Current Mailing Address:			New Mailing Address:			
551 NW 77 SUITE 114 BOCA RAT	STREET					
FEI Number:	03-0474344	FEI Number Applied For ( )	FEI Number Not Appli	olicable ( ) Certificate of Status Desired ( )		
Name and	Address of Co	urrent Registered Agent:	Name and	d Address of New Registered Agent:		
	STREET ON, FL 33487 named entity s		rpose of changing it	its registered office or registered agent, or both	h,	
SIGNATUR					_	
Election Cam		c Signature of Registered Agent  Trust Fund Contribution ( ).	t	Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTO	ORS:	
Title: Name: Address: City-St-Zip:		Delete L :UITE 114	Title: Name: Address: City-St-Zip:	()Change()Addition		
Title: Name: Address: City-St-Zip:	D () WOLF, THOMAS 551 NW 77 ST S BOCA RATON, F	UITE 114	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () MOTEN, SHEZA 551 NW 77 ST S BOCA RATON, F	UITE 114	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () LINDLEY, DAVID 551 NW 77 ST S BOCA RATON, F	UITE 114	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	D () GANNON, JAME 551 NW 77 ST S BOCA RATON, F	UITE 114	Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	( )	Delete	Title: Name: Address: Citv-St-Zip:	D ( ) Change (X) Addition URSO, LEONARD 551 NW 77 ST SUITE 114 BOCA RATON FL 33487		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GARY BACKUS P 04/23/2004

PETER LONGORIA, DIRECTOR 551 NW 77 ST SUITE 114 BOCA RATON, FL 33487