2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P03000134735

Address:

City-St-Zip:

1324 HIGHLAND CIR.

KISSIMMEE, FL 34744 US

Entity Name: SAFETY GUARD FENCE OF ORLANDO, INC.

FILED Jan 08, 2007 Secretary of State

Current Principal Place of Business:			New Principal Place	of Business:	
	HLAND CIRCLE EE, FL 34744	=			
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	HLAND CIRCLE EE, FL 34744	≣			
FEI Number	: 20-0481645	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	l Address of C	urrent Registered Agent:	Name and Address of	of New Registered Agent:	
	EY, MARTINE				
30 ADAMS KISSIMME	E, FL 34744	US			
	named entity se of Florida.	submits this statement for the	purpose of changing its registere	d office or registered agent, or both,	
SIGNATU	RE:				
	Electron	ic Signature of Registered Ag	ent	Date	
Election Ca	mpaign Financing	g Trust Fund Contribution ().			
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title:	, ,	Delete	Title:	() Change () Addition	
Name: Address:	HOUGHTON, R 1324 HIGHLAN		Name: Address:		
City-St-Zip:	KISSIMMEE, FI		City-St-Zip:		
Title:		Delete	Title:	() Change () Addition	
Name:	HOUGHTON, K		Name:		
Address:	1324 HIGHLAN		Address:		
City-St-Zip:	KISSIMMEE, FI	_ 34/44 US	City-St-Zip:		
Title:	, ,	Delete	Title:	() Change () Addition	
Name:	HOUGHTON, R		Name:		
Address:	1324 HIGHLAN		Address:		
City-St-Zip:	KISSIMMEE, FI	_ 34/44 US	City-St-Zip:		
Title:	, ,	Delete	Title:	() Change () Addition	
Name:	HOLIGHTON K	RISTYMS	Name:		

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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.

Address:

City-St-Zip:

SIGNATURE: KRISTY HOUGHTON V 01/08/2007