2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000028141

Entity Name: SAFETYGUARD SYSTEMS INC.

1325 47TH AVENUE N.E.

SAINT PETERSBURG, FL 33703

Address:

City-St-Zip:

FILED May 01, 2006 Secretary of State

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
3921 76 A PINELLAS	VENUE SPARK, FL 33	7681			
Current Mailing Address:			New Mailing Address:		
3921 76 A' PINELLAS	VENUE 3 PARK, FL 33	781			
FEI Number	: 20-0716503	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	d Address of C	urrent Registered Agent:	Name and Address	of New Registered Agent:	
6599 114T	ROBERT I JR. TH STREET E, FL 33772	US			
	e named entity s e of Florida.	submits this statement for the	purpose of changing its registere	ed office or registered agent, or both,	
SIGNATU					
	Electron	ic Signature of Registered Ag	ent	Date	
		3(2)(b), F.S., the corporation did n j Trust Fund Contribution ().	ot receive the prior notice.		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR	
Title: Name: Address: City-St-Zip:	P () YOUNG, ROBE 6599 114TH ST SEMINOLE, FL	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SCOTT, LELAN 1325 47TH AVE		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SECR () YOUNG, ROBE 6599 114TH ST SEMINOLE, FL	REET	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	TREA () SCOTT, LELAN	Delete D M	Title: Name:	() Change () Addition	

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: ROBERT YOUNG P 05/01/2006