## 2007 FOR PROFIT CORPORATION REINSTATEMENT

## DOCUMENT# P05000024175

Entity Name: SECURITY GUYS INC.

Title:

Name:

Address:

City-St-Zip:

() Delete

FILED May 10, 2007 Secretary of State

**Current Principal Place of Business: New Principal Place of Business:** 5445 TWIN PALMS RD FRUITLAND PARK, FL 34731 **Current Mailing Address: New Mailing Address:** 5445 TWIN PALMS RD FRUITLAND PARK, FL 34731 FEI Number: 26-0143009 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: FOREMAN, BRYAN 5445 TWIN PALMS RD FRUITLAND PARK, FL 34731 US The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. SIGNATURE: BRYAN FOREMAN Electronic Signature of Registered Agent Date In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice. Election Campaign Financing Trust Fund Contribution ( ). **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: DIR () Delete Title: (X) Change ( ) Addition FOREMAN, BRYAN FOREMAN, BRYAN Name: Name: 5445 TWIN PALMS RD 5445 TWIN PALMS RD Address: Address: City-St-Zip: FRUITLAND PARK, FL 34731 City-St-Zip: FRUITLAND PARK, FL 34731 Title: Title: VΡ () Delete (X) Change ( ) Addition Name: FOREMAN, TRACY Name: FOREMAN, TRACY 5445 TWIN PALMS RD 5445 TWIN PALMS RD Address: Address: FRUITLAND PARK, FL 34731 FRUITLAND PARK, FL 34731 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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.

Title:

Name:

Address:

City-St-Zip:

Ρ SIGNATURE: BRYAN FOREMAN 05/10/2007

( ) Change (X) Addition

SCHMOOKLER, RAYMOND

5842 MILLERS POND LANE

POWDER SPRINGS, GA 30127 US