2008 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P06000117972

FILED
Apr 16, 2008
Secretary of State

Entity Name: COVERAGE SECURITY INC.

Current Principal Place of Business:	**New Principal Place of Business:**
635 NE 64 ST 8 MIAMI, FL 33138	1780 NE 191 ST 609 MIAMI, FL 33179

Current Mailing Address:	**New Mailing Address:**
635 NE 64 ST 8 MIAMI, FL 33138	1780 NE 191 ST 609 MIAMI, FL 33179

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:	**Name and Address of New Registered Agent:**
WILLIAMS, JOSEPH A 635 NE 64 ST 8 MIAMI, FL 33138 US	WILLIAMS, JOSEPH A 1780 NE 191 ST 609 MIAMI, FL 33179 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: 04/16/2008
Electronic Signature of Registered Agent Date

Election Campaign Financing Trust Fund Contribution ( ).

OFFICERS AND DIRECTORS:		**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**	
Title:	P ( ) Delete	Title:	P (X) Change ( ) Addition
Name:	WILLIAMS, JOSEPH A	Name:	WILLIAMS, JOSEPH A
Address:	635 NE 64 ST	Address:	1780 NE 191 ST # 609
City-St-Zip:	MIAMI, FL 33138	City-St-Zip:	MIAMI, FL 33179

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.

SIGNATURE: JOSEPH A WILLIAMS P 04/16/2008
Electronic Signature of Signing Officer or Director Date