

**2003 FOR PROFIT CORPORATION
UNIFORM BUSINESS REPORT (UBR)**

Amended

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
03 MAY 13 2003
TAMPA FL 33602



CHECK HERE IF MAKING CHANGES

DOCUMENT # P97000038328					
1. Entity Name SHIELD SECURITY, INC.					
Principal Place of Business 312 E VENICE AVE SUITE 118 VENICE, FL 34292 US			Mailing Address 312 E VENICE AVE SUITE 118 VENICE, FL 34292 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-3450127	
Zip		Country		Applied For Not Applicable	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
GROLMAN, DAVID 312 E VENICE AVE STE 118 VENICE, FL 34292			Name MARK Verhay		
			Street Address (P.O. Box Number is Not Acceptable)		
			312 E. Venice Ave, Ste 118		
			City Venice		
			FL Zip Code 34292		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE			DATE 5/9/03		
Signature, typed or printed name of registered agent and title if applicable.			(NOTE: Registered Agent signature required when existing)		
<p>FILE NOW!!! FEE IS \$750.00 After May 1, 2003 Fee will be \$550.00 Make Check Payable to Florida Department of State</p>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	President / Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	GROLMAN, DAVID		NAME	Mark Verhay	
STREET ADDRESS	312 E VENICE AVE, STE 118		STREET ADDRESS	312 E. Venice Ave, Ste 118	
CITY-ST-ZIP	VENICE, FL 34292		CITY-ST-ZIP	Venice FL 34292	
TITLE		<input type="checkbox"/> Delete	TITLE	Vice-President / Secretary	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Michelle Verhay	
STREET ADDRESS			STREET ADDRESS	312 E. Venice Ave, Ste 118	
CITY-ST-ZIP			CITY-ST-ZIP	Venice FL 34292	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE:			DATE: 5/9/03 941.716.3861		
Signature and typed or printed name of signing officer or director			Daytime Phone #		

CR2034 (10/02)

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