

1.) CORPORATION NAME: ACCLAIM GUARD SERVICES, INC. 2.) VA REGISTERED AGENT NAME AND OFFICE ADDRESS: INCORP SERVICES INC 7288 HANOVER GREEN DR MECHANICSVILLE, VA 23111 3.) CITY OR COUNTY OF VA REGISTERED OFFICE: HANOVER COUNTY 4.) STATE OR COUNTRY OF INCORPORATION: CA	DUE DATE: 2/28/2013 SCC ID NO: F1886573 5.) STOCK INFORMATION <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;">CLASS</td> <td style="width: 50%;">AUTHORIZED</td> </tr> <tr> <td>COMMON</td> <td>1,500</td> </tr> </table>	CLASS	AUTHORIZED	COMMON	1,500
CLASS	AUTHORIZED				
COMMON	1,500				

6.) PRINCIPAL OFFICE ADDRESS: ADDRESS: 1823 E. 17TH ST. SUITE #112 CITY/ST/ZIP: SANTA ANA, CA 92705
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7.) DIRECTORS AND PRINCIPAL OFFICERS: All directors and principal officers must be listed. An individual may be designated as both a director and an officer.

NAME: MATIN JAHANGIRI TITLE: PRES/CEO ADDRESS: 1823 E. 17TH ST. SUITE 112 CITY/ST/ZIP/CO: SANTA ANA, CA 92705	<input checked="" type="checkbox"/>	OFFICER	<input checked="" type="checkbox"/>	DIRECTOR
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NAME: MAKAY JAHNGIRI TITLE: SECRETARY ADDRESS: 1823 E. 17TH ST. SUITE 112 CITY/ST/ZIP/CO: SANTA ANA, CA 92705	<input checked="" type="checkbox"/>	OFFICER	<input type="checkbox"/>	DIRECTOR
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I AFFIRM THAT THE INFORMATION CONTAINED IN THIS ELECTRONIC REPORT IS ACCURATE AND COMPLETE AS OF THE DATE BELOW AND THAT I AM LEGALLY AUTHORIZED TO SIGN THIS REPORT.

/s/ MATIN JAHANGIRI	MATIN JAHANGIRI, PRES/CEO	2/27/2013
SIGNATURE OF DIRECTOR/OFFICER LISTED IN THIS REPORT	PRINTED NAME AND CORPORATE TITLE	DATE

It is a Class 1 misdemeanor for any person to sign a document, which includes this electronic record, that is false in any material respect with the intent that the document be delivered to the Commission for filing.