

B1 (Official Form 1)(04/13)

United States Bankruptcy Court Southern District of Florida		Voluntary Petition
Name of Debtor (if individual, enter Last, First, Middle): SMI Security Management, Inc.		Name of Joint Debtor (Spouse) (Last, First, Middle):
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names):		All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all) 56-2312082		Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all)
Street Address of Debtor (No. and Street, City, and State): 2555 NW 102 Ave Ste 102 Doral, FL <div style="text-align: right; font-size: small;">ZIP Code 33172</div>		Street Address of Joint Debtor (No. and Street, City, and State): <div style="text-align: right; font-size: small;">ZIP Code</div>
County of Residence or of the Principal Place of Business: Miami-Dade		County of Residence or of the Principal Place of Business:
Mailing Address of Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>		Mailing Address of Joint Debtor (if different from street address): <div style="text-align: right; font-size: small;">ZIP Code</div>
Location of Principal Assets of Business Debtor (if different from street address above):		
Type of Debtor (Form of Organization) (Check one box) <input type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input checked="" type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	Nature of Business (Check one box) <input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101 (51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input checked="" type="checkbox"/> Other	Chapter of Bankruptcy Code Under Which the Petition is Filed (Check one box) <input type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input checked="" type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding
Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending:	Tax-Exempt Entity (Check box, if applicable) <input type="checkbox"/> Debtor is a tax-exempt organization under Title 26 of the United States Code (the Internal Revenue Code).	Nature of Debts (Check one box) <input type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input checked="" type="checkbox"/> Debts are primarily business debts.
Filing Fee (Check one box) <input checked="" type="checkbox"/> Full Filing Fee attached <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	Chapter 11 Debtors Check one box: <input checked="" type="checkbox"/> Debtor is a small business debtor as defined in 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D). Check if: <input checked="" type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter). Check all applicable boxes: <input type="checkbox"/> A plan is being filed with this petition. <input type="checkbox"/> Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).	
Statistical/Administrative Information <input checked="" type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY
Estimated Number of Creditors <input checked="" type="checkbox"/> 1-49 <input type="checkbox"/> 50-99 <input type="checkbox"/> 100-199 <input type="checkbox"/> 200-999 <input type="checkbox"/> 1,000-5,000 <input type="checkbox"/> 5,001-10,000 <input type="checkbox"/> 10,001-25,000 <input type="checkbox"/> 25,001-50,000 <input type="checkbox"/> 50,001-100,000 <input type="checkbox"/> OVER 100,000		
Estimated Assets <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		
Estimated Liabilities <input checked="" type="checkbox"/> \$0 to \$50,000 <input type="checkbox"/> \$50,001 to \$100,000 <input type="checkbox"/> \$100,001 to \$500,000 <input type="checkbox"/> \$500,001 to \$1 million <input type="checkbox"/> \$1,000,001 to \$10 million <input type="checkbox"/> \$10,000,001 to \$50 million <input type="checkbox"/> \$50,000,001 to \$100 million <input type="checkbox"/> \$100,000,001 to \$500 million <input type="checkbox"/> \$500,000,001 to \$1 billion <input type="checkbox"/> More than \$1 billion		

Voluntary Petition <i>(This page must be completed and filed in every case)</i>		Name of Debtor(s): SMI Security Management, Inc.	
All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet)			
Location Where Filed: - None -		Case Number:	Date Filed:
Location Where Filed:		Case Number:	Date Filed:
Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet)			
Name of Debtor: - None -		Case Number:	Date Filed:
District:		Relationship:	Judge:
Exhibit A		Exhibit B	
(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.) <input type="checkbox"/> Exhibit A is attached and made a part of this petition.		(To be completed if debtor is an individual whose debts are primarily consumer debts.) I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the debtor the notice required by 11 U.S.C. §342(b). X _____ Signature of Attorney for Debtor(s) (Date)	
Exhibit C			
Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? <input type="checkbox"/> Yes, and Exhibit C is attached and made a part of this petition. <input checked="" type="checkbox"/> No.			
Exhibit D			
(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) <input type="checkbox"/> Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: <input type="checkbox"/> Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.			
Information Regarding the Debtor - Venue (Check any applicable box)			
<input checked="" type="checkbox"/> Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.			
<input type="checkbox"/> There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.			
<input type="checkbox"/> Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.			
Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes)			
<input type="checkbox"/> Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) _____ (Name of landlord that obtained judgment) _____ (Address of landlord)			
<input type="checkbox"/> Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and			
<input type="checkbox"/> Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.			
<input type="checkbox"/> Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).			

<p>Voluntary Petition</p> <p><i>(This page must be completed and filed in every case)</i></p>	<p>Name of Debtor(s): SMI Security Management, Inc.</p>
Signatures	
<p style="text-align: center;">Signature(s) of Debtor(s) (Individual/Joint)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct. [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).</p> <p>I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X _____ Signature of Debtor</p> <p>X _____ Signature of Joint Debtor</p> <p>_____ Telephone Number (If not represented by attorney)</p> <p>_____ Date</p>	<p style="text-align: center;">Signature of a Foreign Representative</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.</p> <p>(Check only one box.)</p> <p><input type="checkbox"/> I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.</p> <p><input type="checkbox"/> Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.</p> <p>X _____ Signature of Foreign Representative</p> <p>_____ Printed Name of Foreign Representative</p> <p>_____ Date</p>
<p style="text-align: center;">Signature of Attorney*</p> <p>X <u>/s/ Peter D. Russin</u> Signature of Attorney for Debtor(s)</p> <p><u>Peter D. Russin 765902</u> Printed Name of Attorney for Debtor(s)</p> <p><u>Meland Russin & Budwick, P.A.</u> Firm Name</p> <p><u>200 South Biscayne Boulevard</u> <u>Suite 3200</u> <u>Miami, FL 33131</u> Address</p> <p><u>(305) 358-6363 Fax: (305) 358-1221</u> Telephone Number</p> <p><u>August 20, 2013</u> Date</p> <p><small>*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.</small></p>	<p style="text-align: center;">Signature of Non-Attorney Bankruptcy Petition Preparer</p> <p>I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.</p> <p>_____ Printed Name and title, if any, of Bankruptcy Petition Preparer</p> <p>_____ Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)</p> <p>_____ Address</p> <p>X _____ Date</p> <p>Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.</p> <p>Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:</p> <p>_____ If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.</p> <p><i>A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.</i></p>
<p style="text-align: center;">Signature of Debtor (Corporation/Partnership)</p> <p>I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.</p> <p>The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.</p> <p>X <u>/s/ Karina Aponte</u> Signature of Authorized Individual</p> <p><u>Karina Aponte</u> Printed Name of Authorized Individual</p> <p><u>President</u> Title of Authorized Individual</p> <p><u>August 20, 2013</u> Date</p>	

United States Bankruptcy Court
Southern District of Florida

In re SMI Security Management, Inc.

Debtor(s)

Case No.

Chapter 11

STATEMENT REGARDING AUTHORITY TO SIGN AND FILE PETITION

I, **Karina Aponte**, declare under penalty of perjury that I am the **President** of **SMI Security Management, Inc.**, and that the following is a true and correct copy of the resolutions adopted by the Board of Directors of said corporation at a special meeting duly called and held on the 19th day of August, 2013.

"Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that **Karina Aponte**, **President** of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that **Karina Aponte**, **President** of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that **Karina Aponte**, **President** of this Corporation is authorized and directed to employ **Peter D. Russin 765902**, attorney and the law firm of **Meland Russin & Budwick, P.A.** to represent the corporation in such bankruptcy case."

Date August 19, 2013

Signed /s/ Karina Aponte

Karina Aponte, President

Resolution of Board of Directors
of
SMI Security Management, Inc.

Whereas, it is in the best interest of this corporation to file a voluntary petition in the United States Bankruptcy Court pursuant to Chapter 11 of Title 11 of the United States Code;

Be It Therefore Resolved, that **Karina Aponte, President** of this Corporation, is authorized and directed to execute and deliver all documents necessary to perfect the filing of a chapter 11 voluntary bankruptcy case on behalf of the corporation; and

Be It Further Resolved, that **Karina Aponte, President** of this Corporation is authorized and directed to appear in all bankruptcy proceedings on behalf of the corporation, and to otherwise do and perform all acts and deeds and to execute and deliver all necessary documents on behalf of the corporation in connection with such bankruptcy case, and

Be It Further Resolved, that **Karina Aponte, President** of this Corporation is authorized and directed to employ **Peter D. Russin 765902**, attorney and the law firm of **Meland Russin & Budwick, P.A.** to represent the corporation in such bankruptcy case.

Date August 19, 2013

Signed /s/ Karina Aponte
Karina Aponte, President

B4 (Official Form 4) (12/07)

United States Bankruptcy Court
Southern District of Florida

In re **SMI Security Management, Inc.**

Debtor(s)

Case No. _____

Chapter **11**

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

Following is the list of the debtor's creditors holding the 20 largest unsecured claims. The list is prepared in accordance with Fed. R. Bankr. P. 1007(d) for filing in this chapter 11 [or chapter 9] case. The list does not include (1) persons who come within the definition of "insider" set forth in 11 U.S.C. § 101, or (2) secured creditors unless the value of the collateral is such that the unsecured deficiency places the creditor among the holders of the 20 largest unsecured claims. If a minor child is one of the creditors holding the 20 largest unsecured claims, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

(1)	(2)	(3)	(4)	(5)
<i>Name of creditor and complete mailing address including zip code</i>	<i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	<i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	<i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	<i>Amount of claim [if secured, also state value of security]</i>
Aequicap PO Box 9088 Fort Lauderdale, FL 33310-9088	Aequicap PO Box 9088 Fort Lauderdale, FL 33310-9088	WC audit 05/03/09 to 05/02/2010		19,312.43
American Capital Realty, LLC 2950 SW 27 Ave Ste 300 Miami, FL 33133	American Capital Realty, LLC 2950 SW 27 Ave Ste 300 Miami, FL 33133	rent for SMI's office space		2,186.36
AT&T PO Box 105262 Atlanta, GA 30348	AT&T PO Box 105262 Atlanta, GA 30348	utility services for fax and internet		142.17
BankUnited 7815 NW 148 St Miami Lakes, FL 33016	BankUnited 7815 NW 148 St Miami Lakes, FL 33016	Blanket Lien (unperfected)		70,412.50 (Unknown secured)
Complete Imaging Systems 13280 SW 120 St Miami, FL 33186	Complete Imaging Systems 13280 SW 120 St Miami, FL 33186	copier/printer lease		226.51
Cover X Corporation 26600 Telegraph Rd Southfield, MI 48033	Cover X Corporation 26600 Telegraph Rd Southfield, MI 48033	audit		2,880.75
DAVOS Financial 2665 S Bayshore Dr Ste 810 Coconut Grove, FL 33133	DAVOS Financial 2665 S Bayshore Dr Ste 810 Coconut Grove, FL 33133	payroll expenses		825.00
Feiler & Leach, P.L. Attn:Michael B. Feiler, Esq. 901 Ponce de Leon Blvd PH Coral Gables, FL 33144	Feiler & Leach, P.L. Attn:Michael B. Feiler, Esq. 901 Ponce de Leon Blvd Coral Gables, FL 33144	professional services		27,205.00
First Insurance Funding Corp. PO Box 66468 Chicago, IL 60666-0468	First Insurance Funding Corp. PO Box 66468 Chicago, IL 60666-0468	insurance		6,679.08

B4 (Official Form 4) (12/07) - Cont.

In re **SMI Security Management, Inc.**

Case No. _____

Debtor(s) _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS

(Continuation Sheet)

(1) <i>Name of creditor and complete mailing address including zip code</i>	(2) <i>Name, telephone number and complete mailing address, including zip code, of employee, agent, or department of creditor familiar with claim who may be contacted</i>	(3) <i>Nature of claim (trade debt, bank loan, government contract, etc.)</i>	(4) <i>Indicate if claim is contingent, unliquidated, disputed, or subject to setoff</i>	(5) <i>Amount of claim [if secured, also state value of security]</i>
Florida Department of Revenue Bankruptcy Section PO Box 6668 Tallahassee, FL 32314-6668	Florida Department of Revenue Bankruptcy Section PO Box 6668 Tallahassee, FL 32314-6668	Sales tax		16,088.61
GFII DVI Cardel Flagler Courtyard, LLC 11580 NW 105 St Miami, FL 33178	GFII DVI Cardel Flagler Courtyard, LLC 11580 NW 105 St Miami, FL 33178	Notice Purposes Only		Unknown
HR Security Consultant 10127 NW 55 Terr Miami, FL 33178	HR Security Consultant 10127 NW 55 Terr Miami, FL 33178	Notice Purposes Only		Unknown
Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346	Payroll tax liability (941 taxes)		39,607.73
IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045	IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045	All property and rights to property per Sect. 6321, 6322 and 6323 of the IRC		295,464.14 (Unknown secured)
Korean Air 6450 NW 22 St Miami, FL 33122	Korean Air 6450 NW 22 St Miami, FL 33122	Notice Purposes Only		Unknown
Law Offices of Eddy O. Marban 1600 Ponce de Leon Blvd Ste 902 Coral Gables, FL 33134	Law Offices of Eddy O. Marban 1600 Ponce de Leon Blvd Ste 902 Coral Gables, FL 33134	professional services		31,365.70
Miami Dade Aviation Department Finance Division PO Box 526624 Miami, FL 33152-6624	Miami Dade Aviation Department Finance Division PO Box 526624 Miami, FL 33152-6624	airport fees		37,491.64
NMS Management Service 2901 S Congress Ave Palm Spring, FL 33461	NMS Management Service 2901 S Congress Ave Palm Spring, FL 33461	drug testing		180.00
Team Software 407 S 27 Ave Omaha, NE 68131	Team Software 407 S 27 Ave Omaha, NE 68131	administrative software		6,593.75
XL Insurance % Sprechman & Associates, P.A. 2775 Sunny Isles Blvd Ste 100 Miami, FL 33160	XL Insurance % Sprechman & Associates, P.A. 2775 Sunny Isles Blvd Miami, FL 33160	general liability deductible		2,000.00

B4 (Official Form 4) (12/07) - Cont.

In re SMI Security Management, Inc.
Debtor(s)

Case No. _____

LIST OF CREDITORS HOLDING 20 LARGEST UNSECURED CLAIMS
(Continuation Sheet)

**DECLARATION UNDER PENALTY OF PERJURY
ON BEHALF OF A CORPORATION OR PARTNERSHIP**

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing list and that it is true and correct to the best of my information and belief.

Date August 20, 2013

Signature /s/ Karina Aponte
Karina Aponte
President

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

B6 Summary (Official Form 6 - Summary) (12/07)

United States Bankruptcy Court
Southern District of Florida

In re SMI Security Management, Inc.
 Debtor

Case No. _____

Chapter 11

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	0.00		
B - Personal Property	Yes	6	161,885.49		
C - Property Claimed as Exempt	No	0			
D - Creditors Holding Secured Claims	Yes	3		658,918.38	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	3		55,696.34	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	8		424,088.39	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	No	0			N/A
J - Current Expenditures of Individual Debtor(s)	No	0			N/A
Total Number of Sheets of ALL Schedules		23			
Total Assets			161,885.49		
Total Liabilities				1,138,703.11	

**United States Bankruptcy Court
Southern District of Florida**

In re SMI Security Management, Inc.,
Debtor

Case No. _____
Chapter 11

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. § 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	
Student Loan Obligations (from Schedule F)	
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	
TOTAL	

State the following:

Average Income (from Schedule I, Line 16)	
Average Expenses (from Schedule J, Line 18)	
Current Monthly Income (from Form 22A Line 12; OR, Form 22B Line 11; OR, Form 22C Line 20)	

State the following:

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column		
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		
4. Total from Schedule F		
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		

B6A (Official Form 6A) (12/07)

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption	Amount of Secured Claim
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None

Sub-Total > **0.00** (Total of this page)

Total > **0.00**

(Report also on Summary of Schedules)

0 continuation sheets attached to the Schedule of Real Property

B6B (Official Form 6B) (12/07)

In re SMI Security Management, Inc.

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petitioner is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
1. Cash on hand		Petty cash (SMI's office)	-	456.00
2. Checking, savings or other financial accounts, certificates of deposit, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.		BankUnited primary business checking account ending *5750	-	7.51
		JPMorgan Chase Bank, N.A. - Chase BusinessSelect checking account ending *7121	-	0.00
		JPMorgan Chase Bank, N.A. - Chase Analysis Business checking account ending *1834	-	658.48
		JPMorgan Chase Bank, N.A. - Chase BusinessPlus Extra checking account ending *1818	-	0.00
3. Security deposits with public utilities, telephone companies, landlords, and others.		Florida Department of Revenue	-	9,178.64
		Fort Lauderdale Airport	-	1,000.00
4. Household goods and furnishings, including audio, video, and computer equipment.	X			
5. Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.	X			
6. Wearing apparel.	X			
7. Furs and jewelry.	X			
8. Firearms and sports, photographic, and other hobby equipment.		5 Caliber 38 revolvers (SMI's office)	-	500.00
		4 cameras (LATAM)	-	200.00
		2 cameras (SMI's office)	-	
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
			Sub-Total >	12,000.63
			(Total of this page)	

3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re SMI Security Management, Inc.

Case No. _____

Debtor

SCHEDULE B - PERSONAL PROPERTY
(Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.	X			
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and nonnegotiable instruments.	X			
16. Accounts receivable.		Accounts receivable (see attached)	-	127,134.86
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.		Loan receivable from Jose Manuel Sordo (\$100 deduction from paycheck until paid in full)	-	1,000.00
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			

Sub-Total > **128,134.86**
(Total of this page)

Sheet 1 of 3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re **SMI Security Management, Inc.** Case No. _____
 Debtor

SCHEDULE B - PERSONAL PROPERTY
 (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.		Lawsuit against Regions Security Services, Inc. and Carlos Rivero, Case No. 11-23111-CA-01, pending in the Circuit Court in and for Miami-Dade County, Florida	-	Unknown
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			
25. Automobiles, trucks, trailers, and other vehicles and accessories.		Chevrolet Colorado 2006 VIN 1GCCS148X68251079 (White Rock)	-	300.00
		Chevrolet Colorado 2007 VIN 1GCCS149078116607 (White Rock)	-	300.00
		Chevrolet Cobalt 2006 VIN 1G1AK55F367804245 (SMI's office)	-	800.00
		Chevrolet Cobalt 2006 VIN 1G1AK55F667793970 (LATAM)	-	500.00
		Dodge Grand Caravan 2006 VIN 1D4GP25B17B122707 (LATAM)	-	3,000.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.		5 computers (SMI's office)	-	500.00
		3 laptops (SMI's office) 1 laptop (LATAM)	-	1,100.00
		4 printers (SMI's office) 4 printers (SMI's storage)	-	500.00
			Sub-Total >	7,000.00
				(Total of this page)

Sheet 2 of 3 continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE B - PERSONAL PROPERTY
 (Continuation Sheet)

Type of Property	N O N E	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption
		SMI's office furniture and supplies including file cabinets, chairs, desk, office panel, microwave, refrigerator and office supplies	-	10,000.00
		2 cell phones (LATAM) 2 cell phones (SMI's office)	-	500.00
29. Machinery, fixtures, equipment, and supplies used in business.		45 radios with battery and charger (LATAM) 3 radios with battery and charger (SMI's office) 8 radios with battery and charger (SMI's storage) 2 radios with battery and charger (White Rock)	-	1,500.00
		18 metal detectors (LATAM) 7 metal detectors (SMI's office) 2 metal detectors (Korean Air)	-	800.00
		1 power generator (SMI's storage)	-	100.00
		2 tour guard systems - Proxiguard (SMI's office)	-	300.00
		4 security mirrors (SMI's storage)	-	50.00
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.		Golf Cart Serial 1028707 (LATAM) Golf Cart Serial 1555876 (LATAM) Golf Cart Serial 2321635 (LATAM)	-	1,500.00

Sub-Total > **14,750.00**
 (Total of this page)
 Total > **161,885.49**

Sheet 3 of 3 continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Sched B, Item #16

SMI Security Management, Inc.



Invoice Aging - Days after Invoice
Date Range: All Dates

Customers Listed: To

Aging Date: 08/20/13

Cut-Off Date: 08/20/13

08/20/13

9:16:31 AM

Page 1 of 2

Customer #	Customer Name	PO #	Job #	Invoice #	Days Out	Original Amount	Current	31 - 60	61 - 90	91 Plus	Balance Due
1	Lan			(786) 265-6033		Last Payment:	08/16/13	\$5,332.72	\$0.00	2% 10 Net 30	
	08/12/13 Inv		100a Warehouse	13924		17,592.63	17,592.63				17,592.63
	08/12/13 Inv		100a Warehouse	13925		2,143.62	2,143.62				2,143.62
	08/12/13 Inv		100a Warehouse	13926	7	3,281.04	3,281.04				3,281.04
	08/12/13 Inv		100a Warehouse	13927		76.56	76.56				76.56
	08/12/13 Inv		100a Warehouse	13928		6,644.26	6,644.26				6,644.26
	08/12/13 Inv		100a Warehouse	13929		5,677.64	5,677.64				5,677.64
	08/12/13 Inv		100a Warehouse	13930		13,454.00	13,454.00				13,454.00
	08/12/13 Inv		100a Warehouse	13931		16,402.30	16,402.30				16,402.30
	08/12/13 Inv		100a Warehouse	13932		12,670.29	12,670.29				12,670.29
	08/12/13 Inv		100a Warehouse	13933		10,852.04	10,852.04				10,852.04
	08/12/13 Inv		100a Warehouse	13934		75.59	75.59				75.59
	08/12/13 Inv		100a Warehouse	13935	7	5,332.72	5,332.72				5,332.72
			[NONE] Balance Sheet								
Unapplied Cash: (\$108888.32) Actual Amount Due: -14,685.63						Sub Total:	94,202.69	94,202.69			94,202.69
31	Courtyard by Marriott Miami Flagler Station			(305) 884-1799		Last Payment:	08/15/13	\$2,381.82		Due On Receipt	
	07/01/13 Inv		31a Courtyard By Marriott	13805	49	113.42			113.42		113.42
	08/05/13 Inv		31a Courtyard By Marriott	13903	14	793.94	793.94				793.94
	08/12/13 Inv		31a Courtyard By Marriott	13923	7	793.94	793.94				793.94
			[NONE] Balance Sheet								
				Sub Total:		1,701.30	1,587.88	113.42			1,701.30
48	City of Miramar			(954) 538-6825		Last Payment:	08/02/13	\$2,717.00		Due On Receipt	
	08/01/13 Inv		48e Miramar - Banquet H	13897	18	506.35	506.35				506.35
	08/01/13 Inv		48d Miramar Cultural Art	13898	18	9,200.75	9,200.75				9,200.75
	08/01/13 Inv		48c City of Miramar Depa	13899	18	3,025.75	3,025.75				3,025.75
	08/01/13 Inv		48a City Of Miramar Wast	13900	18	4,232.96	4,232.96				4,232.96
	08/01/13 Inv		48a City Of Miramar Wast	13901	18	50.00	50.00				50.00
			[NONE] Balance Sheet								
Unapplied Cash: (\$0.30) Actual Amount Due: 17,015.51						Sub Total:	17,015.81	17,015.81			17,015.81
75	TAM Airlines					Last Payment:	08/15/13	\$28,430.12		Due On Receipt	
	08/12/13 Inv		100a Warehouse	13936	7	14,215.06	14,215.06				14,215.06

Company Totals

C - Indicates an Invoice in Collection

SMI Security Management, Inc.



Invoice Aging - Days after Invoice
Date Range: All Dates

Customers Listed: To

Aging Date: 08/20/13

Cut-Off Date: 08/20/13

08/20/13

9:16:31 AM

Page 2 of 2

Customer # Status	Customer Name		PO #	Job #	Invoice #	Days Out	Original Amount	Current	Credit Limit			Balance Due
	Date	Ref							31 - 60	61 - 90	91 Plus	
Sub Total:							14,215.06	14,215.06				14,215.06
Totals :						\$127,134.86	\$127,021.44	\$113.42	\$0.00	\$0.00	\$0.00	\$127,134.86
							99.91%	0.09%	0.00%	0.00%	100.00%	
Total Unapplied Cash :												(\$108,888.62)
Grand Totals :						\$127,134.86	\$127,021.44	\$113.42	\$0.00	\$0.00	\$0.00	\$18,246.24

Company Totals

C - Indicates an Invoice in Collection

B6D (Official Form 6D) (12/07)

In re SMI Security Management, Inc.

Case No. _____

Debtor

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor" ,include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community			C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN							
Account No. Loan No. 52636 BankUnited 7815 NW 148 St Miami Lakes, FL 33016	-	11/4/10 Credit Line Agreement Blanket Lien (unperfected)						70,412.50	Unknown
		Value \$ Unknown							
Account No. BankUnited PO Box 026030 Miami, FL 33102		Representing: BankUnited						Notice Only	
		Value \$							
Account No. USDC 10-24613-SEITZ Israel Cables, et al. % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-	10/3/12 Judgment Lien # J12000718851 [NOTE: This judgment of \$119,413.67 has been satisfied; however, the lien has not been terminated in public records.]					X	0.00	0.00
		Value \$ 0.00							
Account No. FTL # 10FLR0020044 IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045	X -	6/30/2010 Federal Tax Lien: \$233,198.91 All property and rights to property per Sect. 6321, 6322 and 6323 of the IRC						295,464.14	Unknown
		Value \$ Unknown							
Subtotal								365,876.64	0.00
(Total of this page)									

2 continuation sheets attached

B6D (Official Form 6D) (12/07) - Cont.

In re SMI Security Management, Inc.
Debtor

Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
		DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN						
Account No. Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346							Notice Only	
			Representing: IRS Jacksonville					
			Value \$					
Account No. U.S. Attorney General Main Justice Building 950 Pennsylvania Ave, NW Room 4400 Washington, DC 20530-0001							Notice Only	
			Representing: IRS Jacksonville					
			Value \$					
Account No. FTL # 12FLR0011871 IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045								
			12/31/11 - 3/31/12					
			Federal Tax Lien: \$41,700.04					
			All property and rights to property per Sect. 6321, 6322 and 6323 of the IRC					
			Value \$ 0.00				0.00	0.00
Account No. FTL # 13FLR0003698 IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045								
			12/31/10 - 9/30/12					
			Federal Tax Lien: \$19,845.98					
			All property and rights to property per Sect. 6321, 6322 and 6323 of the IRC					
			Value \$ 0.00				0.00	0.00
Account No. FTL # 13FLR0008005 IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045								
			12/31/12					
			Federal Tax Lien: \$110,744.49					
			All property and rights to property per Sect. 6321, 6322 and 6323 of the IRC					
			Value \$ 0.00				0.00	0.00
Subtotal							0.00	0.00
(Total of this page)								

Sheet 1 of 2 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

B6D (Official Form 6D) (12/07) - Cont.

In re SMI Security Management, Inc.
Debtor

Case No. _____

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS
(Continuation Sheet)

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R H W J C	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
Account No. USDC 11-24245-ROSENBAUM Ulises Molina et al. % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-					X	0.00	0.00
Account No. USDC 11-24245-ROSENBAUM Ulises Molina et al. % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	X -					X	110,477.50	Unknown
Account No. Lien # J11000592860 State of Florida, Dept of Revenue Miami North Service Ctr 8175 NW 12 St, Ste 119 Miami, FL 33126-1828	-						0.00	0.00
Account No. Lien # J11000592878 State of Florida, Dept of Revenue Miami North Service Ctr 8175 NW 12 St, Ste 119 Miami, FL 33126-1828	-						182,564.24	Unknown
Account No. Lien # J12000124621 State of Florida, Dept of Revenue Miami North Service Ctr 8175 NW 12 St, Ste 119 Miami, FL 33126-1828	-						0.00	0.00
Subtotal (Total of this page)							293,041.74	0.00
Total (Report on Summary of Schedules)							658,918.38	0.00

Sheet 2 of 2 continuation sheets attached to
Schedule of Creditors Holding Secured Claims

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.

TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)

Domestic support obligations

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

Extensions of credit in an involuntary case

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

Wages, salaries, and commissions

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

Certain farmers and fishermen

Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

Deposits by individuals

Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

Taxes and certain other debts owed to governmental units

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

Commitments to maintain the capital of an insured depository institution

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9).

Claims for death or personal injury while debtor was intoxicated

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

B6E (Official Form 6E) (4/13) - Cont.

In re SMI Security Management, Inc.
Debtor

Case No. _____

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

Wages, salaries, and commissions

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B O R	H W J C	Husband, Wife, Joint, or Community DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. Various Employees		-	Subject to motion to pay prepetition wages and resulting taxes.				Unknown	Unknown
Account No.								
Account No.								
Account No.								
Account No.								
Subtotal							0.00	0.00
(Total of this page)							0.00	0.00

Sheet 1 of 2 continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6E (Official Form 6E) (4/13) - Cont.

In re **SMI Security Management, Inc.**

Case No. _____

Debtor

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS
(Continuation Sheet)

**Taxes and Certain Other Debts
Owed to Governmental Units**

TYPE OF PRIORITY

CREDITOR'S NAME, AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions.)	C O D E B T O R	H U S B A N D, W I F E, J O I N T, O R C O M M U N I T Y	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M	AMOUNT NOT ENTITLED TO PRIORITY, IF ANY
								AMOUNT ENTITLED TO PRIORITY
Account No. Business Partner No. 2033467 Florida Department of Revenue Bankruptcy Section PO Box 6668 Tallahassee, FL 32314-6668			July 2013 Sales tax					0.00
							16,088.61	16,088.61
Account No. Florida Department of Revenue Marhsall Stranberg, Exec. Director % Agency Clerk - Carlton Building 501 S. Calhoun Street, Room 201 Tallahassee, FL 32399			Representing: Florida Department of Revenue				Notice Only	
Account No. Joel S. Knee, Assistant General Counsel Florida Department of Revenue 3111 N. University Dr, Ste 501 Coral Springs, FL 33065-5096			Representing: Florida Department of Revenue				Notice Only	
Account No. 56-2312082 Internal Revenue Service PO Box 7346 Philadelphia, PA 19101-7346			3Q13 Payroll tax liability (941 taxes)					0.00
							39,607.73	39,607.73
Account No.								
Subtotal								0.00
(Total of this page)							55,696.34	55,696.34
Total								0.00
(Report on Summary of Schedules)							55,696.34	55,696.34

Sheet **2** of **2** continuation sheets attached to
Schedule of Creditors Holding Unsecured Priority Claims

B6F (Official Form 6F) (12/07)

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C					
Account No. xxxxxxx825-0 Aequicap PO Box 9088 Fort Lauderdale, FL 33310-9088							19,312.43
Account No. American Capital Realty, LLC 2950 SW 27 Ave Ste 300 Miami, FL 33133							2,186.36
Account No. Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131							287,000.00
Account No. xxx xxx xxxx xxx0448 AT&T PO Box 105262 Atlanta, GA 30348							142.17
Subtotal (Total of this page)							308,640.96

7 continuation sheets attached

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Case 05-cv-60955-JIC Nixon Augustin % Morgan and Morgan Richard Bernard Celler, Esq. 600 N Pine Island Rd, Ste 400 Fort Lauderdale, FL 33324	-		9/13/05 [NOTE: Final Judgment for \$5,177.00 was satisfied but still appears in public record search.]			X	0.00
Account No. Case 11-24245-CIV-ROSENBAUM Octavio Ceijas % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		7/15/13 [NOTE: Final Judgment for \$2,821.00 was satisfied but still appears in public record search.]			X	0.00
Account No. Case 11-24245-CIV-ROSENBAUM Iliana Cespedes % Anthony F. Sanchez P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		7/15/13 [NOTE: Final Judgment for \$12,289.00 was satisfied but still appears in public record search.]			X	0.00
Account No. xxxxxYX00 Complete Imaging Systems 13280 SW 120 St Miami, FL 33186	-		copier/printer lease				226.51
Account No. Cover X Corporation 26600 Telegraph Rd Southfield, MI 48033	-		audit				2,880.75
Sheet no. <u>1</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	3,107.26

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Lamont, Hanley & Associates, Inc. 1138 Elm St Manchester, NH 03101							Notice Only
Account No. DAVOS Financial 2665 S Bayshore Dr Ste 810 Coconut Grove, FL 33133		-	payroll expenses				825.00
Account No. Case 11-24245-CIV-ROSENBAUM Frank Delgado % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143		-	7/15/13 [NOTE: Final Judgment for \$12,171.00 was satisfied but still appears in public record search.]			X	0.00
Account No. Feiler & Leach, P.L. Attn:Michael B. Feiler, Esq. 901 Ponce de Leon Blvd PH Coral Gables, FL 33144		-	professional services				27,205.00
Account No. xxxxx-xxxx-xxx1380 First Insurance Funding Corp. PO Box 66468 Chicago, IL 60666-0468		-	3/30/13 insurance				6,679.08
Sheet no. <u>2</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	34,709.08

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Case 11-24245-CIV-ROSENBAUM Irina Garcia % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		7/15/13 [NOTE: Final Judgment for \$12,273.00 was satisfied but still appears in public record search.]			X	0.00
Account No. GFII DVI Cardel Flagler Courtyard, LLC 11580 NW 105 St Miami, FL 33178	-		Notice Purposes Only				Unknown
Account No. HR Security Consultant 10127 NW 55 Terr Miami, FL 33178	-		Notice Purposes Only				Unknown
Account No. Korean Air 6450 NW 22 St Miami, FL 33122	-		Notice Purposes Only				Unknown
Account No. LAN Airlines S.A. PO Box 520846 Miami, FL 33152	-		Notice Purposes Only				Unknown
Sheet no. <u>3</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	0.00

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. UCC-1 No. 201206171950 Latin Financial Strategies, Inc. 2020 Ponce de Leon Blvd, Unit 1102 Boynton Beach, FL 33426	-					Unknown
Account No. Law Offices of Eddy O. Marban 1600 Ponce de Leon Blvd Ste 902 Coral Gables, FL 33134	-	professional services				31,365.70
Account No. Case 11-24245-CIV-ROSENBAUM Alberto Lopez % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-	7/15/13 [NOTE: Final Judgment for \$21,594.00 was satisfied but still appears in public record search.]			X	0.00
Account No. Case 11-24245-CIV-ROSENBAUM Ahmed Martel % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-	7/15/13 [NOTE: Final Judgment for \$2,659.00 was satisfied but still appears in public record search.]			X	0.00
Account No. xxxx5248 Miami Dade Aviation Department Finance Division PO Box 526624 Miami, FL 33152-6624	-	airport fees				37,491.64
Subtotal						68,857.34
Sheet no. <u>4</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims					(Total of this page)	

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community		C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. Case 11-24245-CIV-ROSENBAUM Ulises Molina % Anthony Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		7/15/13 [NOTE: Final Judgment for \$12,241.00 was satisfied but still appears in public record search.]			X	0.00
Account No. Case 11-24245-CIV-ROSENBAUM Maria Moncada % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		7/15/13 [NOTE: Final Judgment for \$8,952.00 was satisfied but still appears in public record search.]			X	0.00
Account No. xx7294 Neighborhood Health Partnership PO Box 580046 Charlotte, NC 28258-0046	-		health insurance for \$12,937.17, subject to motion to pay prepetition wages, resulting taxes and benefits.				0.00
Account No. x xxx9600 NMS Management Service 2901 S Congress Ave Palm Spring, FL 33461	-		drug testing				180.00
Account No. xxxx xxxx-xxxxxx-CA-01 Regions Security Services, Inc. c/o Anthony Sanchez, Esq. 6701 Sunset Dr, Suite 101 Miami, FL 33143	-		Counterclaim in litigation styled Debtor v. Regions Security Services, Inc., et al. Case No. 11-23111-CA-01			X	Unknown
Sheet no. <u>5</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	180.00

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	D A T E C L A I M W A S I N C U R R E D A N D C O N S I D E R A T I O N F O R C L A I M. I F C L A I M I S S U B J E C T T O S E T O F F, S O S T A T E.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	A M O U N T O F C L A I M
		H W J C					
Account No. Case 2011-023111-CA-01 Carlos Rivero % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		Counterclaim in litigation styled Debtor v. Regions Security Services, Inc., et al. Case No. 11-23111-CA-01			X	Unknown
Account No. Case 09-cv-21671-KMM Monica Rodriguez % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143	-		3/9/10 [NOTE: Final Judgment for \$23,503.37 was satisfied but still appears in public record search.]			X	0.00
Account No. xxxx xx. xx-xxxxx CA 13 Nell Grasita Smith % Robert J. Fenstersheib & Assoc, P.A. 520 W. Hallandale Beach Blvd Hallandale, FL 33009	-		Litigation pending against Commodore Plaza Condominium Assoc., Inc., Xioev Rodriguez and Debtor. Debtor believes it to be incorrectly named in this litigation.			X	Unknown
Account No. Stor-All, Ltd. - Doral 9600 NW 40 St Miami, FL 33178	-		Notice Purposes Only				Unknown
Account No. TAM Linhas Aereas S.A. % Security Department 6500 NW 22 St Miami, FL 33122	-		Notice Purposes Only				Unknown
Sheet no. <u>6</u> of <u>7</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page)	0.00

B6F (Official Form 6F) (12/07) - Cont.

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS
 (Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 566 Team Software 407 S 27 Ave Omaha, NE 68131	-		administrative software			6,593.75
Account No. The City of Miramar % Randy Cross, Procurement Director 2300 Civic Center Pl Miramar, FL 33025	-		Notice Purposes Only			Unknown
Account No. Jamie Alan Cole, Esq. City Attorney Weiss Serota et al. 200 E Broward Blvd, Ste 1900 Fort Lauderdale, FL 33301	-		Representing: The City of Miramar			Notice Only
Account No. White Rock Quarries South 5500 NW 122 Ave Doral, FL 33178	-		Notice Purposes Only			Unknown
Account No. XL Insurance % Sprechman & Associates, P.A. 2775 Sunny Isles Blvd Ste 100 Miami, FL 33160	-		general liability deductible			2,000.00
Subtotal (Total of this page)						8,593.75
Total (Report on Summary of Schedules)						424,088.39

Sheet no. 7 of 7 sheets attached to Schedule of
 Creditors Holding Unsecured Nonpriority Claims

B6G (Official Form 6G) (12/07)

In re SMI Security Management, Inc. Case No. _____
 Debtor

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract	Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract.
American Capital Realty, LLC 2950 SW 27 Ave Ste 300 Miami, FL 33133	Month-to-Month tenancy for office space, rent \$2,186.36
Complete Imaging Systems 13280 SW 120 St Miami, FL 33186	Lease of 1 Toshiba E Studio 451C copy, print, scan, B/W only, Customer ID 05091YX00
GFII DVI Cardel Flagler Courtyard, LLC 11580 NW 105 St Miami, FL 33178	Security Guard Service Agreement dated 2/15/12.
HR Security Consultant 10127 NW 55 Terr Miami, FL 33178	Consulting Agreement dated 4/1/2006.
Korean Air 6450 NW 22 St Miami, FL 33122	Security Services Agreement dated 7/15/08.
LAN Airlines S.A. and LAN Cargo S.A. PO Box 520846 Miami, FL 33152	Services Agreement dated 6/1/09.
Stor-All, Ltd. - Doral 9600 NW 40 St Miami, FL 33178	Rental agreement number 4004, space number 619, dated 2/3/12, for 10x10 storage unit.
TAM Linhas Aereas S.A. % Security Department 6500 NW 22 St Miami, FL 33122	Services Agreement dated 12/3/12.
The City of Miramar % Randy Cross, Procurement Director 2300 Civic Center Pl Miramar, FL 33025	Agreement between The City of Miramar and SMI Security Management, Inc. for Security Guard Services dated 12/20/11.
White Rock Quarries South 5500 NW 122 Ave Doral, FL 33178	Security Guard Service Agreement dated 2/15/12.

0

_____ continuation sheets attached to Schedule of Executory Contracts and Unexpired Leases

B6H (Official Form 6H) (12/07)

In re **SMI Security Management, Inc.**

Case No. _____

Debtor

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131	Ulises Molina et al. % Anthony F. Sanchez, P.A. 6701 Sunset Dr, Ste 101 Miami, FL 33143
Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131 Ms. Aponte is only liable for the 941 portion in the approx. amount of \$169,000	IRS Jacksonville PO Box 35045 STOP 5750 Attn: Lien Clerk Jacksonville, FL 32202-0045

0
 _____ continuation sheets attached to Schedule of Codebtors

B6 Declaration (Official Form 6 - Declaration). (12/07)

**United States Bankruptcy Court
Southern District of Florida**

In re **SMI Security Management, Inc.**

Debtor(s)

Case No. _____

Chapter **11**

DECLARATION CONCERNING DEBTOR'S SCHEDULES

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of 25 sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date **August 20, 2013**

Signature **/s/ Karina Aponte**

**Karina Aponte
President**

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C. §§ 152 and 3571.

B7 (Official Form 7) (04/13)

**United States Bankruptcy Court
Southern District of Florida**

In re **SMI Security Management, Inc.**

Debtor(s)

Case No.

Chapter **11**

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$3,418,173.00	2013 YTD: Debtor Business Income
\$6,532,814.00	2012: Debtor Business Income
\$6,782,823.00	2011: Debtor Business Income

2. Income other than from employment or operation of business

None State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$1,530.00	United Trading International Corp. from May 2012 to December 2012 for cubicle rental in Debtor's office space

B7 (Official Form 7) (04/13)

2

AMOUNT
\$1,600.00

SOURCE
United Trading International Corp. in 2013 for cubicle rental in Debtor's office space

3. Payments to creditors

None Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS	AMOUNT PAID	AMOUNT STILL OWING
------------------------------	-------------------	-------------	--------------------

None b. *Debtor whose debts are not primarily consumer debts:* List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATES OF PAYMENTS/ TRANSFERS	AMOUNT PAID OR VALUE OF TRANSFERS	AMOUNT STILL OWING
see attached		\$0.00	\$0.00

None c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR	DATE OF PAYMENT	AMOUNT PAID	AMOUNT STILL OWING
Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131 President and 100% shareholder	See response to #23. However, no payments were made with respect to the shareholder loan.	\$0.00	\$287,000.00
Ennia de Aponte Calle F, Parque Residencial Caurimare, Torre B, Apt. 2-1 Caurimare, Caracas, Venezuela Venezuela Karina Aponte's Mother	5-Jun-13 \$35,000.00 7-Aug-13 \$20,000.00	\$55,000.00	\$0.00

* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

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4. Suits and administrative proceedings, executions, garnishments and attachments

None a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
Israel Cables, et al. v. Debtor, Case No. 10-24613-CIV-SEITZ/TURNOFF	Fair Labor Standards Act litigation	USDC, SDFL	Final Judgments
Ulises Molina et al. v. Debtor, Case No. 11-24245-CIV-ROSENBAUM	Fair Labor Standards Act Litigation	USDC, SDFL	Final Judgments
Debtor v. Regions Security Services, Inc., et al. Case No. 11-23111-CA-01	Intellectual Property litigation	11th Judicial Circuit, Miami Dade, Florida	Pending
Nell Grasita Smith v. Debtor, et al.; Case No. 13-002266-CA-01	Torts/Negligence ; Premises Liability	11th Judicial Circuit, Miami Dade, Florida	Pending

None b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED	DATE OF SEIZURE	DESCRIPTION AND VALUE OF PROPERTY
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5. Repossessions, foreclosures and returns

None List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER	DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN	DESCRIPTION AND VALUE OF PROPERTY
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6. Assignments and receiverships

None a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE	DATE OF ASSIGNMENT	TERMS OF ASSIGNMENT OR SETTLEMENT
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None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN	NAME AND LOCATION OF COURT CASE TITLE & NUMBER	DATE OF ORDER	DESCRIPTION AND VALUE OF PROPERTY
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7. Gifts

None List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION	RELATIONSHIP TO DEBTOR, IF ANY	DATE OF GIFT	DESCRIPTION AND VALUE OF GIFT
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8. Losses

None List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY	DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS	DATE OF LOSS
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9. Payments related to debt counseling or bankruptcy

None List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Meland Russin & Budwick, P.A. 200 South Biscayne Boulevard Suite 3200 Miami, FL 33131	8/8/13, 8/15/13, 8/19/13 and 8/20/13. All payments made by Debtor; however, \$18,000 was received directly from Karina Aponte, individually, on 8/20/13 which is a loan from Ms. Aponte to the Debtor.	\$10,000, \$20,000, \$10,241.50 and \$18,423

10. Other transfers

None a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR	DATE	DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED
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None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER DEVICE	DATE(S) OF TRANSFER(S)	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY
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11. Closed financial accounts

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION	TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE	AMOUNT AND DATE OF SALE OR CLOSING
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12. Safe deposit boxes

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY	NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY	DESCRIPTION OF CONTENTS	DATE OF TRANSFER OR SURRENDER, IF ANY
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13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR	DATE OF SETOFF	AMOUNT OF SETOFF
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14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER	DESCRIPTION AND VALUE OF PROPERTY	LOCATION OF PROPERTY
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15. Prior address of debtor

None If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

ADDRESS	NAME USED	DATES OF OCCUPANCY
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16. Spouses and Former Spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within **eight years** immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

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17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

- None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

SITE NAME AND ADDRESS	NAME AND ADDRESS OF GOVERNMENTAL UNIT	DATE OF NOTICE	ENVIRONMENTAL LAW
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- None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT	DOCKET NUMBER	STATUS OR DISPOSITION
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18. Nature, location and name of business

- None a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within **six years** immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

NAME	LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN	ADDRESS	NATURE OF BUSINESS	BEGINNING AND ENDING DATES
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- None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME	ADDRESS
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The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS
Francisco J. Arguelles, CPA
201 Cross Street
Miami Springs, FL 33166

DATES SERVICES RENDERED
since Feb 2008

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME
Francisco J. Arguelles, CPA

ADDRESS
201 Cross Street
Miami Springs, FL 33166

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

20. Inventories

None a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY INVENTORY SUPERVISOR DOLLAR AMOUNT OF INVENTORY
 (Specify cost, market or other basis)

None b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS NATURE OF INTEREST PERCENTAGE OF INTEREST

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None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS	TITLE	NATURE AND PERCENTAGE OF STOCK OWNERSHIP
Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131	President	100% shareholder

22 . Former partners, officers, directors and shareholders

None a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME	ADDRESS	DATE OF WITHDRAWAL
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None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS	TITLE	DATE OF TERMINATION
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23 . Withdrawals from a partnership or distributions by a corporation

None If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR	DATE AND PURPOSE OF WITHDRAWAL	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131 President and 100% shareholder	See attached. All distributions were for compensation and/or expense reimbursements.	See attached.
Rek International Business, Inc. Karina Aponte (joint account) 117 NW 42 Ave Apt 1607 Miami, FL 33126 Karina Aponte is the President and 100% shareholder of Rek	See attached. All funds transferred from SMI to Rek were returned to SMI.	See attached.

24. Tax Consolidation Group.

None If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION	TAXPAYER IDENTIFICATION NUMBER (EIN)
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25. Pension Funds.

None If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND	TAXPAYER IDENTIFICATION NUMBER (EIN)
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DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

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I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct to the best of my knowledge, information and belief.

Date August 20, 2013

Signature /s/ Karina Aponte
Karina Aponte
President

[An individual signing on behalf of a partnership or corporation must indicate position or relationship to debtor.]

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

S.O.F.A. #3b

Name and address of Creditor	Dates of payment	Amount paid	Still owing
Florida Department Of Revenue/Sales Taxes	20-May-13	\$16,341.64	
Miami Service Center	20-Jun-13	\$13,169.57	
8175 Nw 12th St Ste 119	22-Jul-13	\$13,298.54	
Doral, Fl 33126-1828	TOTAL	\$42,809.75	\$ 16,088.61
Internal Revenue Services (Payroll 941-940)	30-May-13	\$39,521.92	
51 Sw 1st Ave	12-Jun-13	38,530.66	
Miami, Fl 33130	25-Jun-13	10,356.41	
	25-Jun-13	38,517.95	
	10-Jul-13	39,336.68	
	24-Jul-13	39,263.36	
	7-Aug-13	39,565.10	
	7-Aug-13	217.17	
	7-Aug-13	2,804.63	
	TOTAL	248,113.88	\$ 39,607.73
Internal Revenue Services (Stip Plan)	14-Jun-13	5,000.00	
51 Sw 1st Ave	12-Jul-13	5,000.00	
Miami, Fl 33130	TOTAL	10,000.00	\$ 295,464.14
Florida Department Of Revenue/Unemployment	1-Jul-13	5,650.00	
Miami Service Center	31-Jul-13	6,310.43	
8175 Nw 12th St Ste 119	30-Jul-13	5,650.00	
Doral, Fl 33126-1828		17,610.43	\$ 182,564.24
First Insurance Funding Corp.	7-Aug-13	6,361.03	\$ 6,679.08
P.O. Box 66468			
Chicago 60666-0468			
Eastern Insurance Group, Inc	28-Jun-13	7,073.17	
9570 Sw 107 Ave. # 104	19-Jul-13	7,070.00	
Miami		14,143.17	\$ -
Miami Dade Aviation Department	10-Jun-13	\$30,358.41	
Finance Division	25-Jun-13	\$75.78	
P.o Box 526624	10-Jul-13	\$29,963.43	
Miami 33152-6624	Total	\$60,397.62	\$ 37,491.64
Beic/Bridgfield (Workers Comp. Insurance)	14-Jun-13	\$11,317.04	
P.O Box 32034	18-Jul-13	\$11,857.97	
Lakeland 33082	16-Aug-13	\$11,317.04	
	Total	\$34,492.05	\$ -
Hr & Security Consultant, Corp	30-May-13	\$13,089.12	
10127 Nw 55 Terrace	11-Jun-13	\$5,000.00	
Miami, Fl 33178	21-Jun-13	\$10,000.00	
	10-Jul-13	\$6,438.36	
	25-Jul-13	\$10,000.00	
	Total	\$44,527.48	\$ -
Bupa Insurance Company	27-Jun-13	\$7,793.12	\$ -
7001 SW 97th Avenue			
Miami, Florida 33173			
Meland Russin & Budwick Attorneys At Law	7-Aug-13	\$10,000.00	
200 South Biscayne Boulevard	15-Aug-13	\$20,000.00	
Miami, Fl 33131	16-Aug-13	\$6,241.50	
	19-Aug-13	\$4,000.00	
	20-Aug-13	\$18,423.00	
	Total	\$58,664.50	\$ -

Appleone Employment Services	17-Jun-13	6,500.00	\$ -
6505 Blue Lagoon Dr #120			
Miami			
(305) 591-8883			
Karina Aponte	29-May-13	\$2,000.00	
300 S Biscayne Blvd, Apt 2306			
Miami, FL 33131			
	29-May-13	\$2,000.00	
	29-May-13	\$2,807.00	
	26-Jun-13	\$2,000.00	
	7-Aug-13	\$4,000.00	
	7-Aug-13	\$1,759.06	
	Total	\$14,566.06	\$ 287,000.00
Rek International Business	29-May-13	\$400.00	
117 Nw 42 Ave, Suite# 102			
Doral, 33172			
	7-Aug-13	\$12,000.00	
	7-Aug-13	\$25,000.00	
	8-Aug-13	\$10,000.00	
	8-Aug-13	\$72,000.00	
	Total	\$119,400.00	\$ -
American Capital Realty, LLC	5-May-13	\$2,186.36	
2950 Sw 27 Th Avenue, Suite 300			
Miami 33133			
	3-Jun-13	\$2,186.36	
	1-Jul-13	\$2,186.36	
	Total	\$6,559.08	\$ 2,186.36
Ennia De Aponte	5-Jun-13	\$35,000.00	
Calle F, Parque Residencial Caurimare, Torre B, Apt. 2-1			
Caurimare, Caracas, Venezuela			
	7-Aug-13	\$20,000.00	
	Total	\$55,000.00	\$ -
Michael Feiler (Lawyer)	29-Jul-13	\$3,000.00	
901 Ponce De Leon Blvd			
penthouse suite			
Coral Gables, 33144			
	7-Aug-13	\$3,000.00	
	15-Aug-13	\$5,000.00	
	Total	\$11,000.00	\$ 27,205.00
Anthony F. Sanchez, P.A. Trust Account	10-Jun-13	\$85,000.00	\$ -
6701 Sunset Drive, Suite 101			
Miami, FL 33143			
Neighborhood Health Partnership, Inc	19-Jun-13	\$13,547.29	
P.O Box 580046			
Charlotte 28258-0046			
	22-Jul-13	\$12,937.17	
	Total	\$26,484.46	\$ 12,937.17

SMI Security Management, Inc.



Payroll Check History

Group Employee

Employee #'s Listed: 354 To 354

S.O.F.A. #23

Check Dates: 08/01/12 To 08/31/13

08/20/13 7:57:03 AM Page 1 of 7

Maximum Pay Security Level 9

Batch Security Level: 1

Batch Type Automatic Checks

401 K Earnings Check Frequency

Check Amount

Employee Name

354 08/01/12 2911 Aponte, Karina 1,707.88 Normal 1,707.88 Bi-Weekly 2,307.69 2,307.69

Hours: 1,707.88 Earnings: 2,307.69 Taxes: 65.87

Deta .. Deductions: 65.87

08/15/12 3067 Normal 1,707.88 Bi-Weekly 2,307.69 2,307.69

Hours: 1,707.88 Earnings: 2,307.69 Taxes: 65.87

Deta .. Deductions: 65.87

08/29/12 3221 Normal 1,707.88 Bi-Weekly 2,307.69 2,307.69

Hours: 1,707.88 Earnings: 2,307.69 Taxes: 65.87

Deta .. Deductions: 65.87

09/12/12 3375 Normal 1,707.88 Bi-Weekly 2,307.69 2,307.69

Hours: 1,707.88 Earnings: 2,307.69 Taxes: 65.87

Deta .. Deductions: 65.87

09/26/12 3524 Normal 1,707.88 Bi-Weekly 2,307.69 2,307.69

Hours: 1,707.88 Earnings: 2,307.69 Taxes: 65.87

Deta .. Deductions: 65.87

Total 2,307.69
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

Continued.....
 Bi-Weekly
 Automatic Checks 639
 Security Level: 1

-----Earnings-----
 Type Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69
 -----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

-----Deductions-----
 Type
 Automatic Checks 640

-----Earnings-----
 Type Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69
 -----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

-----Deductions-----
 Type
 Automatic Checks 644

-----Earnings-----
 Type Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69
 -----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

-----Deductions-----
 Type
 Automatic Checks 646

-----Earnings-----
 Type Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69
 -----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

-----Deductions-----
 Type
 Automatic Checks 648

-----Earnings-----
 Type Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69
 -----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

-----Deductions-----
 Type
 Automatic Checks 651

-----Earnings-----
 Type Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69
 -----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94

-----Deductions-----
 Type
 Automatic Checks 651
 Security Level: 1

354 Aponte, Karina

10/10/12 3674 1,707.88 Normal

Hours 1,707.88

-----Earnings-----

-----Taxes-----

-----Deductions-----

10/24/12 13824 1,707.88 Normal

Hours 1,707.88

-----Earnings-----

-----Taxes-----

-----Deductions-----

11/07/12 3979 1,707.88 Normal

Hours 1,707.88

-----Earnings-----

-----Taxes-----

-----Deductions-----

11/21/12 4132 1,707.88 Normal

Hours 1,707.88

-----Earnings-----

-----Taxes-----

-----Deductions-----

12/05/12 4293 1,707.88 Normal

Hours 1,707.88

-----Earnings-----

-----Taxes-----

-----Deductions-----

354 Aponte, Karina

12/19/12 4456 1,707.88 Normal

Hours 1,707.88

-----Earnings-----

-----Taxes-----

-----Deductions-----

12/28/12 4617 1,707.88 Normal Bi-Weekly 1
 Deta ..

-----Taxes-----
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

-----Earnings-----
 Type Hours Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69

-----Deductions-----
 Type Taxabl Non Tax
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

01/09/13 4778 1,661.72 Normal Bi-Weekly 1
 Deta ..

-----Taxes-----
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

-----Earnings-----
 Type Hours Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69

-----Deductions-----
 Type Taxabl Non Tax
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

01/30/13 5005 1,661.72 Normal Bi-Weekly 1
 Deta ..

-----Taxes-----
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

-----Earnings-----
 Type Hours Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69

-----Deductions-----
 Type Taxabl Non Tax
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

02/13/13 5170 1,661.72 Normal Bi-Weekly 1
 Deta ..

-----Taxes-----
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

-----Earnings-----
 Type Hours Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69

-----Deductions-----
 Type Taxabl Non Tax
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

02/27/13 5337 1,661.72 Normal Bi-Weekly 1
 Deta ..

-----Taxes-----
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

-----Earnings-----
 Type Hours Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69

-----Deductions-----
 Type Taxabl Non Tax
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

03/13/13 5509 1,661.72 Normal Bi-Weekly 1
 Deta ..

-----Taxes-----
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

-----Earnings-----
 Type Hours Taxable Non Tax
 Hours/Salary Paid 2,307.69
 Total 2,307.69

-----Deductions-----
 Type Taxabl Non Tax
 Federal W 403.56 Vista Health Plan 65.87
 FICA 96.92 Total 65.87
 Medicare 33.46
 Total 533.94
 Automatic Checks

Continued....

354 Aponte, Karina

Security Level: 1

Date	Hours	Type	Earnings	Taxes	Deductions	
			Taxable		Taxabl	
			Non Tax		Non Tax	
03/27/13	5678	Normal	Bi-Weekly	675	Automatic Checks	1
		Hours/Salary Paid	2,307.69	Federal W	403.56	Vista Health Plan
		Total	2,307.69	FICA	143.08	Total
				Medicare	33.46	
				Total	580.10	
04/10/13	5771	Normal	Bi-Weekly	678	Automatic Checks	1
		Hours/Salary Paid	2,307.69	Federal W	403.56	Vista Health Plan
		Total	2,307.69	FICA	143.08	Total
				Medicare	33.46	
				Total	580.10	
04/24/13	6012	Normal	Bi-Weekly	681	Automatic Checks	1
		Hours/Salary Paid	2,307.69	Federal W	403.56	Vista Health Plan
		Total	2,307.69	FICA	143.08	Total
				Medicare	33.46	
				Total	580.10	
05/08/13	6148	Normal	Bi-Weekly	683	Automatic Checks	1
		Hours/Salary Paid	2,307.69	Federal W	403.56	Vista Health Plan
		Total	2,307.69	FICA	143.08	Total
				Medicare	33.46	
				Total	580.10	
						Security Level: 1
05/22/13	6317	Normal	Bi-Weekly	685	Automatic Checks	1
		Hours/Salary Paid	2,307.69	Federal W	403.56	Vista Health Plan
		Total	2,307.69	FICA	143.08	Total
				Medicare	33.46	
				Total	580.10	

Continued....

06/05/13 6568 1,661.72 Normal Bi-Weekly 689 Automatic Checks 1

Hours-----
 Type Hours/Salary Paid
 Total

-----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan
 FICA 143.08 Total
 Medicare 33.46
 Total 580.10

-----Deductions-----
 Type
 Taxabl 65.87
 Non Tax 65.87

06/19/13 6737 1,661.72 Normal Bi-Weekly 690 Automatic Checks 1

Hours-----
 Type Hours/Salary Paid
 Total

-----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan
 FICA 143.08 Total
 Medicare 33.46
 Total 580.10

-----Deductions-----
 Type
 Taxabl 65.87
 Non Tax 65.87

07/03/13 6905 1,661.72 Normal Bi-Weekly 691 Automatic Checks 1

Hours-----
 Type Hours/Salary Paid
 Total

-----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan
 FICA 143.08 Total
 Medicare 33.46
 Total 580.10

-----Deductions-----
 Type
 Taxabl 65.87
 Non Tax 65.87

354 Aponte, Karina
 07/17/13 6988 1,661.72 Normal Bi-Weekly 692 Automatic Checks 1 Security Level: 1

Hours-----
 Type Hours/Salary Paid
 Total

-----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan
 FICA 143.08 Total
 Medicare 33.46
 Total 580.10

-----Deductions-----
 Type
 Taxabl 65.87
 Non Tax 65.87

07/31/13 7163 1,661.72 Normal Bi-Weekly 693 Automatic Checks 1

Hours-----
 Type Hours/Salary Paid
 Total

-----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan
 FICA 143.08 Total
 Medicare 33.46
 Total 580.10

-----Deductions-----
 Type
 Taxabl 65.87
 Non Tax 65.87

08/14/13 7343 1,661.72 Normal Bi-Weekly 697 Automatic Checks 1

Hours-----
 Type Hours/Salary Paid
 Total

-----Taxes-----
 Type
 Federal W 403.56 Vista Health Plan
 FICA 143.08 Total
 Medicare 33.46

-----Deductions-----
 Type
 Taxabl 65.87
 Non Tax 65.87

08/28/13 2,283.41 Normal 580.10 Automatic Checks 1

Hours		Earnings		Taxes		Deductions	
		Taxable	Non Tax	Federal W	Other	Type	Non Tax
Hours/Salary Paid	3,230.76	3,230.76		634.32		Vista Health Plan	65.87
Total	3,230.76	3,230.76		200.31		Total	65.87
				46.85			
				881.48			

Totals: (29 Checks) \$49,365.49 **Aponte, Karina**

Earnings		Taxes		Deduct	
Taxable	Non Tax	Federal W	Other	Total	Totals:
Earnings	67,846.08	11,934.00		1,910.23	
		3,652.63			
		983.73			
		16,570.36			

Grand Check Amounts: \$49,365.49 **Total 1**

Hours		Earnings		Taxes		Deductions	
		Taxable	Non Tax	Federal W	Other	Type	Non Tax
T	67,846.08	67,846.08		11,934.00			
				3,652.63			
				983.73			
				16,570.36			

Name	Payment Method	Number	Date	Amount
Karina Aponte	Check	994	8/7/2013	\$ 4,000.00
Karina Aponte	Check	996	8/7/2013	\$ 1,759.06
Karina Aponte	Check	951	6/26/2013	\$ 2,000.00
Karina Aponte	Check	906	5/29/2013	\$ 2,000.00
Karina Aponte	Check	907	5/29/2013	\$ 2,000.00
Karina Aponte	Check	909	5/29/2013	\$ 2,807.00
Karina Aponte	Check	884	5/3/2013	\$ 1,948.85
Karina Aponte	Check	822	3/31/2013	\$ 2,000.00
Karina Aponte	Check	767	2/7/2013	\$ 2,000.00
Karina Aponte	Check	705	1/3/2013	\$ 106.99
Karina Aponte	Check	691	12/18/2012	\$ 1,153.85
Karina Aponte	Check	549	9/26/2012	\$ 1,885.00
Karina Aponte	Check	523	9/6/2012	\$ 612.06
				\$ 24,272.81

SMI Security Management, Inc.



Check Register
Check Dates: 08/20/12 To 08/20/13

Checks: Cleared and Not Cleared

G/L Cash Account #:

Payment Methods: All

08/19/13

5:10:05 PM

Page 1 of 1

Check #	Check Date	Bank Statement Date	Payment Methods	Cleared	Vendor #	Payee Name	Active	Amount
542	09/20/12	09/30/12	Check	Yes	352	Rek International Business	Yes	40,000.00
594	10/24/12	10/31/12	Check	Yes	352	Rek International Business	Yes	15,000.00
595	10/24/12	10/31/12	Check	Yes	352	Rek International Business	Yes	44,000.00
603	10/30/12	10/31/12	Check	Yes	352	Rek International Business	Yes	55,000.00
686	12/18/12	01/31/13	Check	Yes	352	Rek International Business	Yes	20,000.00
739	01/22/13	01/31/13	Check	Yes	352	Rek International Business	Yes	20,000.00
857	04/04/13	04/30/13	Check	Yes	352	Rek International Business	Yes	10,000.00
908	05/29/13	05/31/13	Check	Yes	352	Rek International Business	Yes	400.00
995	08/07/13	08/31/13	Check	Yes	352	Rek International Business	Yes	12,000.00
1007	08/07/13	08/31/13	Check	Yes	352	Rek International Business	Yes	25,000.00
1009	08/08/13	08/31/13	Check	Yes	352	Rek International Business	Yes	10,000.00
1011	08/08/13	08/31/13	Check	Yes	352	Rek International Business	Yes	72,000.00
Grand Totals								\$323,400.00
Grand Total # of Checks								12

**United States Bankruptcy Court
Southern District of Florida**

In re SMI Security Management, Inc.
Debtor

Case No. _____

Chapter 11

LIST OF EQUITY SECURITY HOLDERS

Following is the list of the Debtor's equity security holders which is prepared in accordance with Rule 1007(a)(3) for filing in this chapter 11 case.

Name and last known address or place of business of holder	Security Class	Number of Securities	Kind of Interest
Karina Aponte 300 S Biscayne Blvd Apt 2306 Miami, FL 33131	common stock	100%	100% shareholder

DECLARATION UNDER PENALTY OF PERJURY ON BEHALF OF CORPORATION OR PARTNERSHIP

I, the President of the corporation named as the debtor in this case, declare under penalty of perjury that I have read the foregoing List of Equity Security Holders and that it is true and correct to the best of my information and belief.

Date August 20, 2013

Signature /s/ Karina Aponte
Karina Aponte
President

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both.
18 U.S.C §§ 152 and 3571.

**United States Bankruptcy Court
Southern District of Florida**

In re **SMI Security Management, Inc.**

Debtor(s)

Case No.
Chapter

11

VERIFICATION OF CREDITOR MATRIX

I, the President of the corporation named as the debtor in this case, hereby verify that the attached list of creditors is true and correct to the best of my knowledge.

Date: **August 20, 2013**

/s/ Karina Aponte

Karina Aponte/President

Signer/Title

Aequicap
PO Box 9088
Fort Lauderdale, FL 33310-9088

American Capital Realty, LLC
2950 SW 27 Ave
Ste 300
Miami, FL 33133

Karina Aponte
300 S Biscayne Blvd
Apt 2306
Miami, FL 33131

AT&T
PO Box 105262
Atlanta, GA 30348

Nixon Augustin
% Morgan and Morgan
Richard Bernard Celler, Esq.
600 N Pine Island Rd, Ste 400
Fort Lauderdale, FL 33324

BankUnited
7815 NW 148 St
Miami Lakes, FL 33016

Israel Cables, et al.
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Octavio Ceijas
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Iliana Cespedes
% Anthony F. Sanchez P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Complete Imaging Systems
13280 SW 120 St
Miami, FL 33186

Cover X Corporation
26600 Telegraph Rd
Southfield, MI 48033

DAVOS Financial
2665 S Bayshore Dr
Ste 810
Coconut Grove, FL 33133

Frank Delgado
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Feiler & Leach, P.L.
Attn:Michael B. Feiler, Esq.
901 Ponce de Leon Blvd
PH
Coral Gables, FL 33144

First Insurance Funding Corp.
PO Box 66468
Chicago, IL 60666-0468

Florida Department of Revenue
Bankruptcy Section
PO Box 6668
Tallahassee, FL 32314-6668

Irina Garcia
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

GFII DVI Cardel Flagler Courtyard, LLC
11580 NW 105 St
Miami, FL 33178

HR Security Consultant
10127 NW 55 Terr
Miami, FL 33178

Internal Revenue Service
PO Box 7346
Philadelphia, PA 19101-7346

IRS Jacksonville
PO Box 35045
STOP 5750 Attn: Lien Clerk
Jacksonville, FL 32202-0045

Korean Air
6450 NW 22 St
Miami, FL 33122

LAN Airlines S.A.
PO Box 520846
Miami, FL 33152

LAN Airlines S.A. and LAN Cargo S.A.
PO Box 520846
Miami, FL 33152

Latin Financial Strategies, Inc.
2020 Ponce de Leon Blvd, Unit 1102
Boynton Beach, FL 33426

Law Offices of Eddy O. Marban
1600 Ponce de Leon Blvd
Ste 902
Coral Gables, FL 33134

Alberto Lopez
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Ahmed Martel
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Miami Dade Aviation Department
Finance Division
PO Box 526624
Miami, FL 33152-6624

Ulises Molina et al.
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Ulises Molina
% Anthony Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Maria Moncada
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Neighborhood Health Partnership
PO Box 580046
Charlotte, NC 28258-0046

NMS Management Service
2901 S Congress Ave
Palm Spring, FL 33461

Regions Security Services, Inc.
c/o Anthony Sanchez, Esq.
6701 Sunset Dr, Suite 101
Miami, FL 33143

Carlos Rivero
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Monica Rodriguez
% Anthony F. Sanchez, P.A.
6701 Sunset Dr, Ste 101
Miami, FL 33143

Nell Grasita Smith
% Robert J. Fenstersheib & Assoc, P.A.
520 W. Hallandale Beach Blvd
Hallandale, FL 33009

State of Florida, Dept of Revenue
Miami North Service Ctr
8175 NW 12 St, Ste 119
Miami, FL 33126-1828

Stor-All, Ltd. - Doral
9600 NW 40 St
Miami, FL 33178

TAM Linhas Aereas S.A.
% Security Department
6500 NW 22 St
Miami, FL 33122

Team Software
407 S 27 Ave
Omaha, NE 68131

The City of Miramar
% Randy Cross, Procurement Director
2300 Civic Center Pl
Miramar, FL 33025

White Rock Quarries South
5500 NW 122 Ave
Doral, FL 33178

XL Insurance
% Sprechman & Associates, P.A.
2775 Sunny Isles Blvd
Ste 100
Miami, FL 33160

BankUnited
PO Box 026030
Miami, FL 33102

Florida Department of Revenue
Marhsall Stranberg, Exec. Director
% Agency Clerk - Carlton Building
501 S. Calhoun Street, Room 201
Tallahassee, FL 32399

Jamie Alan Cole, Esq.
City Attorney
Weiss Serota et al.
200 E Broward Blvd, Ste 1900
Fort Lauderdale, FL 33301

Joel S. Knee, Assistant General Counsel
Florida Department of Revenue
3111 N. University Dr, Ste 501
Coral Springs, FL 33065-5096

Karina Aponte
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Miami, FL 33131

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Manchester, NH 03101

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Washington, DC 20530-0001