

COMMAND SECURITY CORP
Form 3
March 10, 2005

FORM 3 UNITED STATES SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

OMB APPROVAL

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INITIAL STATEMENT OF BENEFICIAL OWNERSHIP OF SECURITIES

Filed pursuant to Section 16(a) of the Securities Exchange Act of 1934,
Section 17(a) of the Public Utility Holding Company Act of 1935 or Section
30(h) of the Investment Company Act of 1940

(Print or Type Responses)

1. Name and Address of Reporting Person *			2. Date of Event Requiring Statement	3. Issuer Name and Ticker or Trading Symbol	
Â Blake Martin C			(Month/Day/Year)	COMMAND SECURITY CORP [CMMD.OB]	
(Last)	(First)	(Middle)	10/07/2004	4. Relationship of Reporting Person(s) to Issuer	5. If Amendment, Date Original Filed(Month/Day/Year)
C/O COMMAND SECURITY CORP.,Â RTE 55 LEXINGTON PARK, P.O. BOX 340				(Check all applicable)	
(Street)				<input checked="" type="checkbox"/> Director	6. Individual or Joint/Group Filing(Check Applicable Line)
				<input type="checkbox"/> Officer	<input checked="" type="checkbox"/> Form filed by One Reporting Person
				(give title below)	<input type="checkbox"/> Form filed by More than One Reporting Person
				<input type="checkbox"/> 10% Owner	
				<input type="checkbox"/> Other	
				(specify below)	
LAGRANGEVILLE,,Â NYÂ 12540					
(City)	(State)	(Zip)			

Table I - Non-Derivative Securities Beneficially Owned

1. Title of Security (Instr. 4)	2. Amount of Securities Beneficially Owned (Instr. 4)	3. Ownership Form: Direct (D) or Indirect (I) (Instr. 5)	4. Nature of Indirect Beneficial Ownership (Instr. 5)
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Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

SEC 1473 (7-02)

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

Table II - Derivative Securities Beneficially Owned (e.g., puts, calls, warrants, options, convertible securities)

1. Title of Derivative Security (Instr. 4)	2. Date Exercisable and Expiration Date (Month/Day/Year)	3. Title and Amount of Securities Underlying Derivative Security (Instr. 4)	4. Conversion or Exercise Price of Derivative Security	5. Ownership Form of Derivative Security: Direct (D) or Indirect	6. Nature of Indirect Beneficial Ownership (Instr. 5)
	Date Exercisable	Expiration Date	Title	Amount or Number of Shares	

(1)
(Instr. 5)

Options	08/30/2004	^ (1)	Common Stock par value \$0.0001	80,000	\$ 1.35	D	^
Warrants	05/01/2004	01/31/2011	Common Stock par value \$0.0001	50,000	\$ 0.75	D	^

Reporting Owners

Reporting Owner Name / Address	Relationships			
	Director	10% Owner	Officer	Other
Blake Martin C C/O COMMAND SECURITY CORP. RTE 55 LEXINGTON PARK, P.O. BOX 340 LAGRANGEVILLE,, NY 12540	^ X	^	^	^

Signatures

/s/ Martin C.
Blake 03/10/2005

Signature of Reporting Person Date

Explanation of Responses:

- * If the form is filed by more than one reporting person, see Instruction 5(b)(v).
 - ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations. See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).
- (1) If Mr. Blake's employment is terminated upon death, disability, for cause, or voluntarily (other than for good reason), then any unvested options expire as of the date of termination and any vested options must be exercised within 90 days following the date of termination. If the Company terminates his employment without cause or if he resigns for good reason, then unvested options expire as of the date of termination and vested options may be exercised within 180 days following the date of termination.

Remarks:
On October 7, 2004 Martin C. Blake became a Director of Command Security Corp.

Please note that Mr. Blake does not beneficially own any non-derivative securities.

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, See Instruction 6 for procedure. Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB number.