FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION **ANNUAL REPORT**

1997



Secretary of State

FILED

May 19 1997 8:00am

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # 514686

(5)

SAFE ALTERNATIVES CORPORATION OF AMERICA, INC.

Principal Place of Business Mailing Address					-DEF OIDIT BEGIS BEGIS OF OLD STATE OF OUR STATE
27 GOVERNER STREET RIDGERIELD CT 06877 US		27 GOVERNER STREET RIDGEFIELD CT 06877-4651 US			
				3. Date Incorporated or Qualified 11/12/1976	3a. Date of Last Report 10/17/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		06-1413994	Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	3	City & State	•	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30		Yes No
	9. Name and Address of Curre			10. Name and Address of New Re	jistered Agent
3550 MIAM	MAN, FRANK ESO. BISCAYNE BLVD., SUITE 401 II FL 33137) 0	B3 2	ichard I. Fricke Gress (P.O. Box Number is Not Acceptable 53 Lely Beach Blvd arefoot Beach Club onita Springs	PH-01
11. Pursuant office or re agent. I as SIGNATURE	to the provisions of Softions 607 of egistered agent for both, in the State m familiar with send accept including Signature, upon or printed name chargement of	ISINGA	es, the above-named cor authorized by the corpora orida Statutes. E. Registered Agent signature requires	onita_Springs poration submits this statement for the p ation's board of directors. Thereby accep	urpose of changing its registered the appointment as registered
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PV	☐ DELETE	11100		Change Addition
NAME	THOMPSON, STEPHEN J		12 NAME		
STREET ADDRESS	12 DOWNSBURRY COURT		1.3 STHEET ADDRESS	•	
CITY-ST-ZIP	RIDGEFIELD CT 06877		1.4 CITY-ST-ZIP		
TITLE	8	L_ DELETE	217111.6		Change Addition
NAME	FRICKE, RICHARD	n	2.2 NAME		
	WILLIAM OT COOK	ט	2.3 STREET ADDRESS		
ÇITY-ST-ZIP TITLE	WILTON CT 08847	DELETE	2 4 CITY - \$1 - 7IP 3.1 TITLE		Change Addition
NAME	THOMPSON, ROBERT	[3.2 NAME		Change El Monteur
STREET ADDRESS	130 FLAT ROCK DRIVE		3.3 STREET ADDRESS		
CITY-ST-ZIP	RIDGEFIELD CT 06877		3.4. CITY-ST-7IP		'
TITLE	THE GET TEEN OF THE STATE OF TH	DELETE	4.1 11TLE		Change Addition
NAME		 -	4. 2 NAMÉ		-
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CHY - S1 - ZIP		
TITLE		☐ DELE1E	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CHY-ST-ZIP		
TITLE	, , , , , , , , , , , , , , , , , , ,	☐ DELETE	6+TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	,		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - \$1 - ZIP		
14. I do herek Informatio I am an of appears i	by certify that the information suppli in indicated on this annual report or flicer or director of the corporalism in Block 12 or Block 13 if changed,	od with this filing does not quali supplemental annual report is t or the receiver or trustee empow or on an additionant with an add	ify for the exemption state true and accurate and the vered to execute this repo dress.	ed in Section 119.07(3)(i), Florida Statutes at my signature shall have the same loga ort as required by Chapter 607, Florida S	 I further certify that the effect as if made under oath; that latutes; and that my name