

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000009260

FILED  
Jul 08, 2005  
Secretary of State

Entity Name: SAFE RIDE HOME, INC.

**Current Principal Place of Business:**

1825 SOUTHWEST 101 AVENUE  
MIAMI, FL 33165

**New Principal Place of Business:**

**Current Mailing Address:**

1825 SOUTHWEST 101 AVENUE  
MIAMI, FL 33165

**New Mailing Address:**

FEI Number: 06-1662953      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

**Name and Address of New Registered Agent:**

CASTILLO, DENNIS  
1825 SW 101 AVE  
MIAMI, FL 33165    US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title:            PTD            ( ) Delete  
Name:            CASTILLO, DENNIS  
Address:        1825 SOUTHWEST 101 AVENUE  
City-St-Zip:    MIAMI, FL 33165

Title:            ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:            VSD            ( ) Delete  
Name:            CURBELO, JENNYS  
Address:        1825 SOUTHWEST 101 AVENUE  
City-St-Zip:    MIAMI, FL 33165

Title:            ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title:            D              ( ) Delete  
Name:            CAMPA, JESSE  
Address:        1825 SOUTHWEST 101 AVENUE  
City-St-Zip:    MIAMI, FL 33165

Title:            ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DENNIS CASTILLO

P

07/08/2005

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date