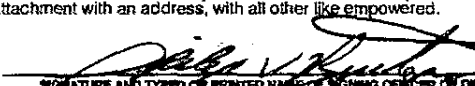


2006 FOR PROFIT CORPORATION ANNUAL REPORT

FILED

Jan 11, 2006 08:00 AM
Secretary of State

DOCUMENT # P03000063017 1. Entity Name WISHBONESAFETY, INC.		
Principal Place of Business 4101 SW 47 AVE STE 106 FT LAUDERDALE, FL 33314	Mailing Address 4101 SW 47 AVE STE 106 FT LAUDERDALE, FL 33314	
DO NOT WRITE IN THIS SPACE		
6. Name and Address of Current Registered Agent BOWEN, MARK D ESQUIRE STEARNS WEAVER MILLER WEISSLER ALHADEFF & 200 E BROWARD BLVD STE 1900 FT LAUDERDALE, FL 33301		DO NOT WRITE IN THIS SPACE
8. 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable. DATE		
FILE NOW!!! FEE IS \$150.00 After May 1, 2006 Fee will be \$550.00	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DPST KURTGIS, MICHAEL P 4101 SW 47 AVE STE 106 FT LAUDERDALE, FL 33314	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE	
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TITLE NAME STREET ADDRESS CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 607, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.		
SIGNATURE: 	Philip V. Kurtgis 1-9-06.	(954) 484-7000
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Dugane Phone #		



01092006 No Chg-P CR2E034 (11/05)

4. FEI Number 57-1180029	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

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01/12/06-80025-015 150.00