

APPROVED AND FILED

96 SEP 30 PM 2:17

SECRETARY OF STATE TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortonham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V62732

1. Corporation Name

Preventive Fire & Safety Equipment, Inc.

600001975936--8 -10/16/96--01008--011 \*\*\*\*\*1.25 \*\*\*\*\*1.25

Principal Place of Business

Mailing Address

1233 Old Dixie Hwy. Lake Park, FL 33403 US

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3. Date Incorporated or Qualified 09/10/1992

3a. Date of Last Report 06/05/1996

2. Principal Place of Business

2a. Mailing Address

21 State, Apt. #, etc.

26 State, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

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4. FEI Number 65-0348221

Applied for Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust; Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes [X] No

9. Name and Address of Current Registered Agent

Trafelet, Craig L. 1233 Old Dixie Hwy. #11 Lake Park, FL 33403

10. Name and Address of New Registered Agent

81 Name Leslie R. Trafelet 82 Street Address (P.O. Box Number is Not Acceptable) 962 Northlake Blvd. 83 Apt. 230 84 City Lake Park FL 85 Zip Code 33403

11. Payment to the provisions of Sections 607.0507 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fully aware of the obligations of Section 607.0505, Florida Statutes.

SIGNATURE

Leslie Trafelet

President

9-16-96

Signature of Registered Agent (Required when registering)

Table with 2 columns: NAME, OFFICE ADDRESS, CITY, STATE, ZIP. Contains entries for Leslie Robert Trafelet at 962 Northlake Blvd. #230, Lake Park, FL.

Table with 2 columns: TITLE, NAME, STREET ADDRESS, CITY-STATE-ZIP. Contains entries for Leslie Robert Trafelet at 962 Northlake Blvd. Apt. 230, Lake Park, FL.

14. I hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information included on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I am the 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 in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Leslie R. Trafelet 9-16-96 561-863-9900

CR2E034 (3/96)