

2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 393838

Entity Name: HAYMAN SAFE CO., INC.

FILED
Aug 15, 2007
Secretary of State

Current Principal Place of Business:

1291 N SR 426
OVIEDO, FL 32765

New Principal Place of Business:

Current Mailing Address:

1291 N SR 426
OVIEDO, FL 32765

New Mailing Address:

FEI Number: 59-1419783

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAYMAN, GARY
350 RIVER CHASE DRIVE
ORLANDO, FL 32807 US

Name and Address of New Registered Agent:

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

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: HAYMAN, GARY
Address: 305 RIVER CHASE DRIVE
City-St-Zip: ORLANDO, FL 32807

Title: DC () Delete
Name: HAYMAN, CORALYN
Address: 39917 BRYAN LN
City-St-Zip: UMATILLA, FL 32784

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: AARON HAYMAN

CFO

08/15/2007

Electronic Signature of Signing Officer or Director

Date