

# 2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 486099

**FILED**  
**Feb 15, 2009**  
**Secretary of State**

**Entity Name:** SAFER ENTERPRISE, INC.

**Current Principal Place of Business:**

PO BOX 940691  
MIAMI, FL 33194

**New Principal Place of Business:**

1524 SW 143 PLACE  
MIAMI, FL 33184

**Current Mailing Address:**

PO BOX 940691  
MIAMI, FL 33194 US

**New Mailing Address:**

PO BOX 940691  
MIAMI, FL 33194

**FEI Number:** 59-1621514

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

FERNANDEZ, HUMBERTO  
1524 SW 143 PLACE  
MIAMI, FL 33184 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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: FERNANDEZ, SARA,  
Address: 1524 SW 143 PLACE  
City-St-Zip: MIAMI, FL 33184

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

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: HUMBERTO FERNANDEZ

VP

02/15/2009

\_\_\_\_\_ Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date