## 2007 FOR PROFIT CORPORATION ANNUAL REPORT

## **DOCUMENT# 577489**

FILED Mar 23, 2007 Secretary of State

Entity Name: LESTER KING FIRE AND SAFETY EQUIPMENT, INC.

Current Principal Place of Business:		New Principal Place of Business:		
	TH STREET A, FL 3423727	703		
Current Mailing Address:		New Mailing Address:		
	TH STREET A, FL 3423727	03		
FEI Number	: 59-1829040	FEI Number Applied For()	FEI Number Not Applicable ( )	Certificate of Status Desired ( )
Name and	Address of C	urrent Registered Agent:	Name and Address o	of New Registered Agent:
2141 12TH	HRISTOPHER HSTREET FA, FL 35577	US		
	•			
			ourpose of changing its registered	d office or registered agent, or both,
	named entity s e of Florida.		ourpose of changing its registered	d office or registered agent, or both,
n the State	named entity s e of Florida. RE:			d office or registered agent, or both,  Date
n the State	named entity see of Florida. RE: Electroni	ubmits this statement for the p		
n the State	named entity see of Florida. RE: Electroni	ubmits this statement for the place of Signature of Registered Age  Trust Fund Contribution ( ).	ent	
n the State	named entity see of Florida.  RE: Electronic mpaign Financing	ubmits this statement for the price Signature of Registered Age Trust Fund Contribution ( ).  FORS:  Delete	ent	Date
n the State BIGNATUI Election Car DFFICER: Title: Name: Address:	e named entity see of Florida.  RE:  Electroni  mpaign Financing  S AND DIRECT  PD ()  SILEO, CHRISTO 2141 12TH ST  SARASOTA, FL	ubmits this statement for the processing contribution ( ).  FORS:  Delete  OPHER	ent  ADDITIONS/CHANGI  Title: Name: Address:	Date ES TO OFFICERS AND DIRECTORS

I hereby certify that the information supplied with this filing does not qualify for the 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: CHRISTOPHER SILEO PD 03/23/2007