

**2006 FOR PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # F03000003037

1. Entity Name
MTS SAFETY PRODUCTS, INC.



Principal Place of Business
**150 SECOND ST
BELMONT, MS 38827**

Mailing Address
**P.O. BOX 204
GOLDEN, MS 38847**

FILED
Feb 27, 2006 08:00 AM
Secretary of State



02152006 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
64-0611460

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**NATH, LIPIKA
617A HOLYOKE CT
TALLAHASSEE, FL 32301**

**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

Signature, typed or printed name of registered agent and title (if applicable)

(NOTE: Registered Agent signature required when reinstating)

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**

**1100000450423
03/10/06-80005-025 150.00**

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	TIDWELL, BOYD L
STREET ADDRESS	27 LYMAN MACANALLY DR
CITY-ST-ZIP	BELMONT, MS 38827
TITLE	V
NAME	TIDWELL, SANDRA
STREET ADDRESS	27 LYMAN MACANALLY DR
CITY-ST-ZIP	BELMONT, MS 38827
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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IN THIS SPACE**

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: