

FO4000004027
FILED

2004 JUL 12 P 3:45

(Requestor's Name)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



300038078873

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

06/23/04--01029--016 **78.75

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

W04-24431

AL

Office Use Only



FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

FILED

2004 JUL 12 P 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

June 24, 2004

FLORENCE WEINER
5775 NORTH BAY ROAD
MIAMI BEACH, FL 33140

SUBJECT: SAFETY CENTER INC
Ref. Number: W04000024431

We have received your document for SAFETY CENTER INC and your check(s) totaling \$78.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is not available. Therefore, the corporation must adopt an alternate name for use in the state of Florida. To adopt an alternate name the corporation must submit a corporate resolution by the board of directors adopting the alternate name for use in the state of Florida. Please note the corporate resolution must be signed by the chairman, vice chairman, or an officer of the corporation. The alternate name must contain a corporate suffix. Such suffixes include: Corporation, Corp., Incorporated, Inc., Company, and CO.

Please RETURN ALL DOCUMENTATION to the ATTENTION of the DOCUMENT SPECIALIST indicated.

Adding "of Florida" or "Florida" to the end of a name is not acceptable.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6094.

Agnes Lunt
Document Specialist

Letter Number: 404A00041789

TRANSMITTAL LETTER

FILED

2004 JUL 12 P 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TO: Registration Section
Division of Corporations

SUBJECT: SAFETY CENTER INC.
(Name of corporation - must include suffix)

Dear Sir or Madam:

The enclosed "Application by Foreign Corporation for Authorization to Transact Business in Florida", "Certificate of Existence", and check are submitted to register the above referenced foreign corporation to transact business in Florida.

Please return all correspondence concerning this matter to the following:

FLORENCE WEINER
(Name of Person)
SAFETY CENTER INC.
(Firm/Company)
5775 NORTH BAY ROAD
(Address)
MIAMI BEACH FL 33140
(City/State and Zip code)

For further information concerning this matter, please call:

FLORENCE WEINER at (305) 865 3262
(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines St.
Tallahassee, FL 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Enclosed is a check for the following amount:

- ☐ \$70.00 Filing Fee ☒ \$78.75 Filing Fee & Certificate of Status ☐ \$78.75 Filing Fee & Certified Copy ☐ \$87.50 Filing Fee, Certificate of Status & Certified Copy

APPLICATION BY FOREIGN CORPORATION FOR AUTHORIZATION TO TRANSACT
BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 607.1503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO
REGISTER A FOREIGN CORPORATION TO TRANSACT BUSINESS IN THE STATE OF FLORIDA.

1. SAFETY CENTER INC

(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp.," "Inc.," "Co.," or "Corp.")

FILED
2004 JUL 12 P 3:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BABY EVERYWHERE INC

(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)

2. NEW YORK

(State or country under the law of which it is incorporated)

3. 13-8329353

(FEI number, if applicable)

4. 4/5/95

(Date of incorporation)

5. PERPETUAL

(Duration: Year corp. will cease to exist or "perpetual")

6. UPON QUALIFICATION

(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)

7. 5775 NORTH BAY RD MIAMI BEACH FL 33140

(Principal office address)

5775 NORTH BAY RD MIAMI BEACH FL 33140

(Current mailing address)

8. ANY LAWFUL BUSINESS ACTIVITIES

(Purpose(s) of corporation authorized in home state or country to be carried out in state of Florida)

9. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Florence Weiner

Office Address: 5775 North Bay Road

Miami Beach

(City)

, Florida 33140

(Zip code)

10. Registered agent's acceptance:

Having been named as registered agent and to accept service of process for the above stated corporation at the place designated in this application, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Florence Weiner

(Registered agent's signature)

11. Attached is a certificate of existence duly authenticated, not more than 90 days prior to delivery of this application to the Department of State, by the Secretary of State or other official having custody of corporate records in the jurisdiction under the law of which it is incorporated.

12. Names and business addresses of officers and/or directors:

12. Names and business addresses of officers and/or directors:

A. DIRECTORS

FILED

Chairman: FLORENCE WEINER

Address: 5775 NORTH BAY ROAD
MIAMI BEACH FL 33140

2004 JUL 12 P 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Vice Chairman: _____

Address: _____

Director: RICHARD WEINER

Address: 5775 NORTH BAY ROAD
MIAMI BEACH FL 33140

Director: _____

Address: _____

B. OFFICERS

President: FLORENCE WEINER

Address: 5775 NORTH BAY ROAD
MIAMI BEACH FL 33140

Vice President: _____

Address: _____

Secretary: _____

Address: _____

Treasurer: _____

Address: _____

NOTE: If necessary, you may attach an addendum to the application listing additional officers and/or directors.

13. Florence Weiner
(Signature of Chairman, Vice Chairman, or any officer listed in number 12 of the application)

14. FLORENCE WEINER, CHAIRMAN
(Typed or printed name and capacity of person signing application)

State of New York
Department of State

ss:

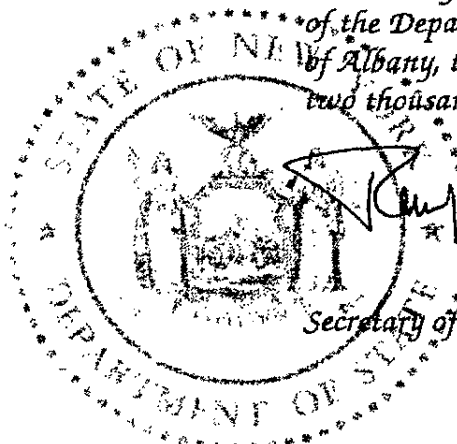
FILED

2004 JUL 12 P 3:45

I hereby certify, that the Certificate of Incorporation of SAFETY CENTER, INC. was filed on 04/05/1995, with perpetual duration, and that a diligent examination has been made of the Corporate index for documents filed with this Department for a certificate, order, or record of a dissolution, and upon such examination, no such certificate, order or record has been found, and that so far as indicated by the records of this Department, such corporation is a subsisting corporation.

The Biennial Statement is past due.

Witness my hand and the official seal
of the Department of State at the City
of Albany, this 20th day of April.
two thousand and four.



Secretary of State

200404210178 61