## 306000004661

(Re	equestor's Name)	
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(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
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06/19/06--01036--014 \*\*78.75

07/13/06--01002--002 \*\*650.00

SECRETARY OF STATE DIVISION OF CORPORATION:

M06-28086



DIVISION OF CORPORATION!

06 JUL 11 PM 3: 50

FLORIDA DEPARTMENT OF STATE Division of Corporations

July 6, 2006

ANGELA M. TIMPERIO 38033 EUCLID AVE. #2 WILLOUGHBY, OH 44094

SUBJECT: LIFE SAFETY ENTERPRISES INC.

Ref. Number: W06000028086

We have received your document for LIFE SAFETY ENTERPRISES 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):

Pursuant to section 607.1502(4), 617.1502(4) or 608.502(4), Florida Statutes, this office collects a civil penalty of \$1000 for each year this entity transacted business or conducted its affairs in Florida prior to qualification and the appropriate annual report/uniform business report fees that would have been due this office had the entity qualified the year it began operations in this state. The amount due this office to cover both annual report/uniform business report and penalty fees is \$650.00.

The certificate of existence must be issued within the last 90 days by the Secretary of State which has custody of the records in the jurisdiction under the laws of which the above listed entity is incorporated/organized.

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) 245-6972.

Doris Brown Document Specialist

Letter Number: 406A00041532

DIVISION OF CORPORATION

## **COVER LETTER**

TO: New Filing Section Division of Corporations			
SUBJECT: LIFE SAFETY ENTERPRISES 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:			
ANGELA M. TIMPERIO			
(Name of Person)			
LIFE SAFETY ENTERPRISES INC.			
(Firm/Company)			
38033 EUCLID AVE. #2 (Address)			
·			
WILLOUGHBY, OHIO 44094 (City/State and Zip code)			
(City/State and Zip code)			
For further information concerning this matter, please call:			
ANGELA TIMPERIO at ( 440 ) 918 - 1641 (Name of Person) (Area Code & Daytime Telephone Number)			
(Name of Person) (Area Code & Daytime Telephone Number)			
STREET/COURIER ADDRESS: New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301  MAILING ADDRESS: New Filing 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 & \$78.75 Filing Fee & Certificate of Status Certified Copy 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. LIFE SAFETY ENTERPRISES INC.  (Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"  "Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
1. LIFE SAFETY ENTERPRISES INC.
(Enter name of corporation; must include "INCORPORATED," "COMPANY," "CORPORATION,"
"Inc.," "Co.," "Corp," "Inc," "Co," or "Corp.")
ب <i>ې</i> ب
(If name unavailable in Florida, enter alternate corporate name adopted for the purpose of transacting business in Florida)
2. OHIO (State or country under the law of which it is incorporated)  3. 34-1816627 (FEI number, if applicable)
4. O8 21 1995 (Date of incorporation)  5. PERPETUAL (Duration: Year corp. will cease to exist or "perpetual")
6. 10/24/2005
(Date first transacted business in Florida, if prior to registration)
(SEE SECTIONS 607.1501 & 607.1502, F.S., to determine penalty liability)
7. 1690 TARPON BAY DR. SO. #203 NAPLES FLORIDA (Principal office address) 34119
(Principal office address) 34119
SAME AS ABOVE
(Current mailing address)
8. SAFETY INSPECTION SERVICES
(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: ANGELA M. TIMPERIO
Office Address: 1690 TARPON BAY DR. 50. 4203
NAPLES, Florida 34119 (City) (Zip code)
(City) (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.
And De Maria
Argula M. Timpurio (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
11. Attached is a continuate of existence duty authornicated, not more than 70 days prior to derivery of this application to

\_ 11.

- 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:

	DIVISION OF CORPORAT
A. DIRECTORS	OF THE CORPORAT
Chairman: ANGELA M. TIMPERIO	
Address: 38033 EUCLIO AUE, #2	
WILLOUGHBY, OHIO 4409	4
Vice Chairman:	· · · · · · · · · · · · · · · · · · ·
Address:	
Director:	
Address:	
Director:	
Address:	•
· · · · · · · · · · · · · · · · · · ·	
B. OFFICERS	
President: ANGELA M. TIMPERIO	
Address: 38033 EUCLID AVE. H2	
WILLOUGHBY, OHIO 44094	
Vice President:	
Address:	
Secretary: ANGELA M. TIMPERIO	
Address:	
Treasurer: ANGELY M. TIMPERIO	
Address:	
Address.	,
NOTE: If necessary, you may attach an addendum to the application listing addi	tional officers and/or directors.
13. Angela M. Timperio	
(Signature of Director or Officer listed in number 12 of the	application)
14: ANGELA M. TIMPERIO	P (* )
(Typed or printed name and capacity of person signing a	opiication)

## United States of America State of Ohio Office of the Secretary of State

DIVISION OF CORPORATION:

06 JUL 11 PM 3: 50

I, J. Kenneth Blackwell, do hereby certify that I am the duly elected, qualified and present acting Secretary of State for the State of Ohio, and as such have custody of the records of Ohio and Foreign corporations; that said records show LIFE SAFETY ENTERPRISES, INC., an Ohio corporation, Charter No. 914714, having its principal location in Parma, County of Cuyahoga, was incorporated on August 21, 1995 and is currently in GOOD STANDING upon the records of this office.



Witness my hand and the seal of the Secretary of State at Columbus, Ohio this 27th day of June, A.D. 2006

Ohio Secretary of State

Validation Number: V2006178J46DEB