

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Jul 09 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **F95000005757 (8)**

1. Corporation Name
JOHNSON SAFETY, INC.

Principal Place of Business
**1425 COOLEY CT
SAN BERNARDINO CA 92408
US**

Mailing Address
**1425 COOLEY CT
SAN BERNARDINO CA 92408
US**



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/27/1995

4. FEI Number

95-3947931

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.

☐

Yes

☐

No

9. Name and Address of Current Registered Agent

**AMATEA, FRANK
500 N.E. 8TH AVENUE
OCALA FL 34470**

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PCD	<input type="checkbox"/> DELETE
NAME	CHANG, CHUNG L	
STREET ADDRESS	22834 LAZY TRAIL	
CITY-ST-ZIP	DIAMOND BAR CA	
TITLE	VSTD	<input type="checkbox"/> DELETE
NAME	CHANG, PEI H	
STREET ADDRESS	22834 LAZY TRAIL	
CITY-ST-ZIP	DIAMOND BAR CA	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

600002583896

-07/09/98--01018--025

*****150.00**

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Pei Hwa Shih Chang

PEI HWA SHIH CHANG

CORPORATE SECRETARY

209-796-3199

CR2E034 (5/98)

(2)

JOHNSON SAFETY, INC.

1425 Cooley Court
San Bernardino, CA 92408
(909) 796-3199 • FAX (909) 796-4115

June 30, 1998

Florida Department of State
Division of Corporations
Annual Reports Filings
P. O. Box 6327
Tallahassee, FL 32314

Subject: 1998 Profit Corporation Annual Report
Document# F95000005757 (8)
FEI Number 95-3947931

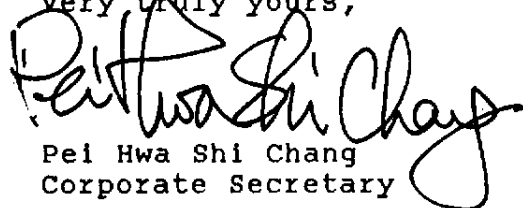
Dear Sir:

This is with regards to the 1998 Profit Corporation Annual Report that we were required to file by May 01, 1998. The first notice that was sent to us was lost in the mail. We did not receive it. For the past two years, we had filed our annual report on time to avoid paying the late fees. This year, my Accounting Manager who knew about this took a maternity leave and did not come back to work until May 21, 1998. Since we did not receive the first notice, nobody knew that we were supposed to file it by May 01, 1998.

We would like to request for Florida Department of State to consider waiving the late fees amounting to \$ 400.00. Enclosed is a check for \$ 150.00 and our 1998 Profit Corporation Annual Report.

If you have any questions regarding these matters, please let me know.

Very truly yours,


Pei Hwa Shi Chang
Corporate Secretary