

2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# K14899

FILED
Jan 16, 2003
Secretary of State

Entity Name: FIRE STOP SYSTEMS, INC.

Current Principal Place of Business:

5174 MABRY DR.
NAPLES, FL 34112 US

New Principal Place of Business:

4173 ARNOLD AVE.
NAPLES, FL 34104 US

Current Mailing Address:

5174 MABRY DR.
NAPLES, FL 34112 US

New Mailing Address:

4173 ARNOLD AVE.
NAPLES, FL 34104 US

FEI Number: 65-0032324

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired (X)

Name and Address of Current Registered Agent:

PEDONE, BARBARA
5174 MABRY DR.
NAPLES, FL 34112 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: PVS () Delete
Name: PEDONE, BARBARA
Address: 5174 MABRY DR.
City-St-Zip: NAPLES, FL 34112

Title: TD () Delete
Name: PEDONE, BARBARA
Address: 5174 MABRY DR.
City-St-Zip: NAPLES, FL 34112

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: PEDONE, BARBARA
Address: 5174 MABRY DR.
City-St-Zip: NAPLES, FL 34112

Title: VP (X) Change () Addition
Name: PEDONE, MICHAEL
Address: 5174 MABRY DR.
City-St-Zip: NAPLES, FL 34112

Title: VP () Change (X) Addition
Name: PEDONE, MICHAEL J
Address: 170 BURNT PINE DR.
City-St-Zip: NAPLES, FL 34119

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: MICHAEL PEDONE

VP

01/16/2003

Electronic Signature of Signing Officer or Director

Date