FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K93411

(2)

SAFELINE, INC.

SIGNATURE:

OAI ELIIV	L, 1110.						
Principal Place of Business Mailing Address						OTOTA BARIN DIENI BARIN BARIN A	
SAFELINE BUSINESS CENTER 6005 BENJAMIN ROAD TAMPA FL 33634		T .	SAFELINE BUSINESS CENTER 6005 BENJAMIN ROAD				
					3. Date Incorporated or Qualified 06/01/1989	3a. Date of Last Re 02/12/1996	eport
2. Principal P	face of Business	2a. Mailing Address			4. FEI Number	- 1	plied For
21		26			59-2950234 Not Applicable		
Suite, Apt #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State		City & State	· · · · · · · · · · · · · · · · · · ·		6. Election Campaign Financing		
23		28	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip	Country	Zip	Country		8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30 9. Name and Address of Current Registered Agent		30		Florida Statutes Yes No 10. Name and Address of New Registered Agent		
			8	Name	10. Name and Address of New He	gistered Agent	
	'Ler, white, gillen, bogg: Ker, p.a. 501 e. Kennedy e						
	nen, P.A. SUI E. NEINHEDT E 1700	DLYU.	8	2 Street Add	fress (P.O. Box Number is Not Acceptab	ole)	
	PA FL 33602		8	3			
11,944				1 00		las las	A
			8	1 1		FL `	Code
11. Pursuant	to the provisions of Sections (07.)	0502 and 607.1508, Florida Stat	ules, the abo	ve-named cor	poration submits this statement for the p	surpose of changing it	s registered
agent. La	registered agent, or both, in any 51 im familiar with and accept the of	tate of Fightal Sucricinange was bligations of Section 607.0505, I	s aumonzeo i Florida Statut	by the corpora es.	poration submits this statement for the pation's board of directors. I hereby acception	or the appointment as	registered
SIGNATURE	1 7 1	Dianie.				1-10-97	7
12.		agent and loc if applicable (N AND DIRECTORS	OTE: Registered A	gent signature requ	pired when reinstating) ADDITIONS/CHANGES TO OFFICE	DAIL	
TITLE	DP OR COS	DELTAS DELTAS	1.1 TITLE		ADDITIONS/CHANGES TO OFFIC	Change	Addition
NAME	LOCK, ANDREW P.		1.2 NAM				
STREET ADDRESS	6005 BENJAMIN RD			ET ADDRESS			
CITY-ST-7IP	TAMPA FL		1.4 CITY				
TITLE	DVP	DELETE	2.1 TITLE			☐ Change	Addition
NAME	DAVIS, PETER J.						
STREET ADDRESS	510 MONTFORD COURT		2.3 STRE	ET ADDRESS			
CITY-ST-ZIP	SALFORD, ENGLAND	- COLETE	2. 4 CITY				and the state of
TITLE	DVP BESWICK, IVAN	DELETE	3.1 TITLE			Change	☐ Addition
NAME STREET ADDRESS	510 MONTFORD COURT		1	1.2 NAME 3.3 STREET ADDRESS			
CITY - ST - ZIP	SALFORD, ENGLAND		3.3 STR:				
TITLE	D	☐ DELETE	4.1 TITLE			☐ Change	Addition
NAME	DEARMAN, ALAN		4. 2 NAM			_ •	
STREET ADDRESS	510 MONTFORD COURT		4.3 STRE	ET ADORESS			
CITY-SI-7iP	SALFORD, ENGLAND		4.4 CITY	ST-ZIP			·····
TITLE	S DANIEL DANIEL I	☐ DELETE	5.1 TITLE			Change	Addition
NAME	FRANKIEWICZ, DANIEL J		5.2 NAM				
STREET ADDRESS	6005 BENJJAMIN RD.			et address			
CHY-SI-7/P Title	TAMPA FL	☐ DELETE	5.4 CHTY 6.1 TITLE			☐ Change	Addition
NAMÉ	FRANKIEWICZ, DANIEL J		6.2 NAM			ET mente	L. Audition
STREET ADDRESS				et address			
CITY - S1 - ZIP	TAMPA FL		6.4 CITY				
		plied with this filing does not qui			id in Section 119.07(3)(i), Florida Statute	s. I further certify that	the
informatic Lam an o appears i	on indicated on this artifual report officer or director of the corporation in Block 12 or Block 3 in changer	or supplemental annual report is n of the rebeiver or hystee empt d, of on arrattachment with an a	s true and accowered to execute to execute the execute to execute the execute	curate and tha ecute this repo	ed in Section 119.07(3)(i), Florida Statute at my signature shall have the same lege ort as required by Chapter 607, Florida S	al effect as if made uni Statutes; and that my r	der oath; that name