COND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 15, 1999.
AMOUNT DUE ON OR BEFORE 09/15/99: $550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $750).

FILED
Sep 10, 1999 8:00 am
Secretary of State

09-10-1999 90013 045 ***550.00

PROFIT CORPORATION ANNUAL REPORT

1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K93411

Corporation Name
SAFELINE, INC.

Principal Place of Business	Mailing Address
FELINE BUSINESS CENTER 05 BENJAMIN ROAD MPA FL 33634	SAFELINE BUSINESS CENTER 6005 BENJAMIN ROAD TAMPA FL 33634

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/01/1989

Principal Place of Business	2a. Mailing Address
	26
Suite, Apt. #, etc.	Suite, Apt. #, etc. 27
City & State	City & State 28
Zip / Country 25	Zip 29 / Country 30

4. FEI Number: 59-2950234 ☐ 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 the current year Intangible Personal Property. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

FOWLER, WHITE, GILLEN, BOGGS, VILLAREAL
BANKER, P.A. 501 E. KENNEDY BLVD.
STE. 1700
TAMPA FL 33602

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

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
DP LOCK, ANDREW P. 6005 BENJAMIN RD TAMPA FL	☑ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition See attached
DVP BESWICK, IVAN 510 MONTFORD COURT SALFORD, ENGLAND	☑ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition Form
D DEARMAN, ALAN 510 MONTFORD COURT SALFORD, ENGLAND	☑ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition for Changes and additions
S FRANKIEWICZ, DANIEL J 6005 BENJJAMIN RD. TAMPA FL	☑ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
T FRANKIEWICZ, DANIEL J 6005 BENJAMIN RD. TAMPA FL	☑ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

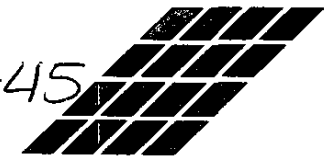
CR2E034 (5/99)

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: Daniel Frankiewicz DANIEL FRANKIEWICZ 8138899500

Safeline
METAL DETECTION

K93411
0144446-900013-45



13. Additions/Changes to Officers and Directors

Title	DC	ADD
Name	Lukas Braunschweiler	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	
Title	D/P	ADD
Name	Angelo Rivera	
Street Address	6005 Benjamin Road	
City, State Zip	Tampa, FL 33634	
Title	D/VP-Controller	CHANGE
Name	Daniel J. Frankiewicz	
Street Address	6005 Benjamin Road	
City, State Zip	Tampa, FL 33634	
Title	D/S	ADD
Name	Brian S. Strayer	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	
Title	VP-Finance	ADD
Name	Thomas W. Caccamo	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	
Title	Asst VP-Taxes	ADD
Name	Thomas A. Finn	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	
Title	VP-Financial Reporting	ADD
Name	Shawn P. Vadala	
Street Address	IM Langacher, 8606	
City, State Zip	Greifensee, Switzerland	
Title	T	ADD
Name	Mary Finnegan	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	
Title	Asst T/Asst S	ADD
Name	Randal Rombeiro	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	
Title	Asst S	ADD
Name	James T. Bellerjeau	
Street Address	1900 Polaris Parkway	
City, State Zip	Columbus, OH 43240	