FILED
03 SEP 25 PM 4:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2003 FOR PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # L59331

1. Entity Name
FLORIDA SAFEGUARD, INC.

Principal Place of Business	Mailing Address
13002 SW 133RD CT MIAMI, FL 33186 P O BOX 163343 MIAMI, FL 33116-343 US	13002 SW 133RD CT MIAMI, FL 33186 P O BOX 163343 MIAMI, FL 33116-343 US

2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

☐ CHECK HERE IF MAKING CHANGES

4. FEI Number 65-0233508 — Applied For / Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
PALMER, ALFRED R 12790 SO. DIXIE HWY MIAMI, FL 33176	Name: PAUL PALMER Street Address (P.O. Box Number is Not Acceptable): 10400 S.W. 123 STREET City: MIAMI FL Zip Code 33156

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Paul Palmer 9/16/03
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FEE IS $150.00
After May 1, 2003 Fee will be $550.00
Amended UBR is $61.25
Make Check Payable to Florida Department of State

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILHELM, JAMES A. 13002 SW 133RD CT MIAMI, FL 33186	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D WILHELM, MARGARET K. 13002 SW 133RD CT MIAMI, FL 33186	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	400025335204 09/25/03--01025--005 **150.00	☐ Change ☐ Addition
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TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

CR2E034 (10/02)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: J. Wilhelm 9/16/03
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

305-775-7888

Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, Fl. 32314

September 16, 2003

Re: Florida Safeguard, Inc. - L59331

Dear Sirs:

Pursuant to 607.193(2)(b) FS, we never received the uniform business report from the Department of State, Division of Corporations for 2003, therefore we are requesting the waiver of the reinstatement fee.

Enclosed are the appropriate forms we downloaded for filing and reinstatement of our corporation.

Thank you for your assistance in this matter.

Sincerely,

James A. Wilhelm
President