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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # L99365

(3)

Corporation Name

PROFESSIONAL SAFETY SERVICES, INC.

Principal Piace of Business

Mailing Address

737 E ATLANTIC BLVD POMPANO BEACH FL 33060 737 E ATLANTIC BLVD POMPANO BEACH FL 3306



POMPANO BEACH FL 33060		POMPANO BEACH FL 33060						
						3. Date Incorporated or Qualifier 09/10/1990		st Report 8/1995
. Principal Plac		<u> </u>	2a. Mailing Add	dress	11-14	4. FEI Number		Applied For
1	N.C. 4 5	near	26 250	N.C	7 31	65-0242488		Not Applicable
Suite, Apt. #,	etc.		Suite, Apt.	#, etc.		5. Certificate of Status Desired		.75 Additional ee Required
City & State Parp	HAD BCh	FL.	28 POM	TOGAC!	Broach PZ	6. Election Campaign Financing Trust Fund Contribution	[] -	5.00 May Be dded to Fees
Zip	Country	C 10	Zip		Country	8. This corporation has liability for		ers 199.032,
550 0		24		oC 30	L VSH	Florida Statutes		
	9. Name and Addre	ss of Current	Hegistered Agen	.t	B1 Name	10. Name and Address of Nev	v Registered Agent	
ZIMMEC	RMAN, STEPHEN L.				7		ν ζ	
	ATLANTIC BLVD				B2 Street Ad	kdress (P.O. Box Number is Not Accep	table)	
	NO BEACH FL 330	60			B3 C S C	N 10. C. 7	27 ·	
1 OIIII A	NO DENOTITE GOO	••						
					B4 City P	OM DAWS BOACH	FL 85	₹300°Z
Pursuant to crutocistorer	the provisions of Section	ons 607 0502 a	and 607,1508, Flori	ida Statutes, th	e above-named corp	poration submits this statement for the poard of directors. I hereby accept the a	purpose of changing	its registered offi
familiar with	and the state of t	tions	0.607.0506, Flow	a Statutes.	r the corporation's be	oard or directors. Thereby accept the a	ppointment as regist	ered agent. Fam
GNATURE 🧳							5/201	76
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4. To hereby certify that the information supplies with this limit is voluntarily furnished and does not qualify for the exemption stated in Section 119.07 (b)(k), Fronda Statutes. Further certify that the information indicated an 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 register or trustee expowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 12 find changed, grown an attack and with an address.

SIGNATURE

2/14/96 (954)946-578