

# 2007 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M31400

FILED  
Jan 09, 2007  
Secretary of State

Entity Name: MARSON SAFETY SYSTEMS, INC.

## Current Principal Place of Business:

5500 NW 15 ST  
STE 28  
MARGATE, FL 33063 US

## New Principal Place of Business:

109 NW 20 STREET  
C030  
BOCA RATON, FL 33431 US

## Current Mailing Address:

1245 SW 26 AVE  
PMB 205  
POMPANO BEACH, FL 33069 US

## New Mailing Address:

FEI Number: 59-2691463      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired (X)

## Name and Address of Current Registered Agent:

LEVINE, MARVIN  
101 PLAZA REAL SOUTH  
107  
BOCA RATON, FL 33432 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: PD ( ) Delete  
Name: LEVINE, MARVIN,  
Address: 101 PLAZA REAL SOUTH  
City-St-Zip: BOCA RATON, FL 33432

Title: D ( ) Delete  
Name: KEHOE, WILLIAM H  
Address: PO BOX 708  
City-St-Zip: CHOCOLOSKEE, FL 34138

Title: D ( ) Delete  
Name: LEVINE, FREDERICK M  
Address: 9031 TRADD STREET  
City-St-Zip: BOCA RATON, FL 33434

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: D (X) Change ( ) Addition  
Name: LEVINE, FREDERICK M  
Address: 10677 ST THOMAS DR  
City-St-Zip: BOCA RATON, FL 33498

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, 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: MARVIN LEVINE

PD

01/09/2007

Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date