

2005 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# M92113

FILED
Jan 31, 2005
Secretary of State

Entity Name: FEDERAL FIRE & SAFETY EQUIPMENT INC.

Current Principal Place of Business:

2651 NE 186TH TERRACE
M MIAMI BCH, FL 33180

New Principal Place of Business:

Current Mailing Address:

2651 NE 186TH TERRACE
M MIAMI BCH, FL 33180

New Mailing Address:

FEI Number: 65-0089115

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTSHTYN, ARYE
2651 NE 186TH TERRACE
N MIAMI BCH, FL 33180 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: ROTSHYTN, ARYE C MR
Address: 2651 NE 186TH TERRACE
City-St-Zip: NORTH MIAMI, FL

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: ROTSHYTN, ARYE C MR
Address: 2651 NE 186TH TERRACE
City-St-Zip: NORTH MIAMI BEACH, FL 33180

Title: D () Change (X) Addition
Name: DIXON, JANET
Address: 19411 NE 22ND AVENUE
City-St-Zip: NORTH MIAMI BEACH, FL 33180

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JANET DIXON

D

01/31/2005

Electronic Signature of Signing Officer or Director

_____ Date