## 2007 NOT-FOR-PROFIT CORPORATION

## **FILED**

		ANNUAL	REF	PORT		. – .				007 8:0	
DOCUMENT # N9700000136  1. Entity Name PAAAS SILENT SURVIVAL SIGNALS, INC.								Secretary of State 01-08-2007 90246 007 ****70.00			
2355 CANFIELD DRIVE				Mailing Address 2355 CANFIELD DRIVE SPRING HILL, FL 34609				. <u>-</u>			
1 '				3. Mailing Address  2355 Cansteld Palve Suite, Apt. #, etc.				01042007 Chg-NP CR2E037 (12/06)			
City & State				City & State				4. FEI Number	· · · · · · · · · · · · · · · · · · ·		Applied For
SpRING	Spring Hill FL. Zip Country					untry	S8.75 Additional			Not Applicable	
3 4609 Hernando 6. Name and Address of Current R				4609 Henra			5. Certificate of Status Desired Fee Required  7. Name and Address of New Registered Agent				
QUAINE, ROBERT 2355 CANFIELD DRIVE SPRING HILL, FL 34609						Name Robert QUZINE Street Address (P.O. Box Number is Not Acceptable) 2365 CZNSIELA DRIVE					
						City	DRING HILL FL 31609				
SIGNATURE	Signature, typed or principle of the state o	A Qua inted name of Fegestered agent 5 \$61.25	and title if appl	9. Election C Trust Fund	ampaign F	inancing	uture required	\$5.00 May Be Added to Fees	Ma	DATE  ke check payable la Department of	
10. OFFICERS AND DIRE				CTORS 11.				ADDITIONS/CHANG	ES TO OFFICER	S AND DIRECTORS	IN 10
NAME STREET ADORESS CITY-ST-ZIP	CEO ELAM, KEITH 9436 REGEN PORT RICHE	CY PARK BLVD.		Telete			235	Dept QUAING 5 Cansield Of 4 G Hill, Fl 39		Change	e 🗍 Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CB DRIZBICK, JO 3461 DELTO SPRING HILL	NA		☐ Delete						☐ Chang	e Addition
NAME STREET ADDRESS CITY-ST-ZIP	T FONZO, FRA 12543 SPRIN SPRING HILL	IG HOLL DR		☐ Deleta	- 6					Change	e Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STRAZZULLO, BETH 16621 U S 19 HWY HUDSON, FL 33544			Delete	NAM Stre	TITLE NAME STREET ADDRESS CITY-ST-ZIP		RISTINA RYMAN GACOMMORCIAL WAY RING HIII FL 34606		<b>₽</b> Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AGARD, CAR 6057 APPLEC SPRING HILL	GATE DRIVE		☐ Delete	4			,	-	☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CEOP QUAINE, ROI 2355 CANFIE SPRING HILL	LD DR		Delete						☐ Change	Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 617, 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: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

January +th, 2001 352-238-0838