

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
**May 10, 1999 8:00 am**  
**Secretary of State**

05-10-1999 90281 008 \*\*\*\*61.25

DOCUMENT # N97000007064 (5)

1. Corporation Name

THE SAFETY MARKETING GROUP, INC.

Principal Place of Business  
730 Atlantic Ave.  
Ormond Beach, FL 32176

Mailing Address  
730 Atlantic Ave.  
Ormond Beach, FL 32176

539840 - 90281 - 8

2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	12/19/97
22 City & State	27 City & State	4. FEI Number
23 Zip	28 Zip	31-1229428
24 Country	29 Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
	30	6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

RICHARD HARPER  
730 ATLANTIC AVE.  
ORMOND BEACH, FL 32176

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROB MULHALL	1.2 NAME	
STREET ADDRESS	901 MEREDITH WAY	1.3 STREET ADDRESS	
CITY-ST-ZIP	SPARKS, NV 89431	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT GLADWISH, SR.	2.2 NAME	
STREET ADDRESS	1166 MICHENER ROAD	2.3 STREET ADDRESS	
CITY-ST-ZIP	SARNIA, ONTARIO N7 4B1	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBERT KINGMAN	3.2 NAME	
STREET ADDRESS	P.O. BOX 532	3.3 STREET ADDRESS	
CITY-ST-ZIP	STURBRIDGE, MA 01566-0532	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOHN SVEC	4.2 NAME	
STREET ADDRESS	939 EAST 62nd AVENUE	4.3 STREET ADDRESS	
CITY-ST-ZIP	DENVER, CO 80216	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BARRY WOODS	5.2 NAME	
STREET ADDRESS	P.O. BOX 8686	5.3 STREET ADDRESS	
CITY-ST-ZIP	EMERYVILLE, CA 94662	5.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RICHARD HARPER	6.2 NAME	
STREET ADDRESS	730 S ATLANTIC AVENUE	6.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH, FL. 32174	6.4 CITY-ST-ZIP	

14. 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 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 receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 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

Date

Daytime Phone #

CR2E037 (11/98)