

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P00000022122

FILED
Jan 18, 2006
Secretary of State

Entity Name: MEDICAL EMERGENCIES & SAFETY CONSULTANTS, INC.

Current Principal Place of Business:

11097 MODEL CIRCLE EAST
BOCA RATON, FL 33428

New Principal Place of Business:

4199 WILLOWOOD LANE
LAKE WORTH, FL 33462

Current Mailing Address:

11097 MODEL CIRCLE EAST
BOCA RATON, FL 33428

New Mailing Address:

4199 WILLOWOOD LANE
LAKE WORTH, FL 33462

FEI Number: 65-0987066

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

HAMILTON, JOAN
2625 N E 6TH AVENUE
WILTON MANORS, FL 33334 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: D () Delete
Name: WETZEL, DAVID J
Address: 11097 MODEL CIRCLE EAST
City-St-Zip: BOCA RATON, FL 33428

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WETZEL, DAVID J
Address: 4199 WILLOWOOD LANE
City-St-Zip: LAKE WORTH, FL 33462

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: DAVID WETZEL

OFF

01/18/2006

Electronic Signature of Signing Officer or Director

Date